State: Pennsylvania Filing Company: United Teacher Associates Insurance Company

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name: Long Term Care

Project Name/Number: GALIC Forms Rate Increase Filing for 2015/

Filing at a Glance

Company: United Teacher Associates Insurance Company

Product Name: Long Term Care State: Pennsylvania

TOI: LTC03G Group Long Term Care

Sub-TOI: LTC03G.001 Qualified

Filing Type: Rate - Other (Not M.U. or G.I. Product)

Date Submitted: 03/08/2016

SERFF Tr Num: GLTC-130340311

SERFF Status: Assigned

State Tr Num: GLTC-130340311

State Status: Received Review in Progress

Co Tr Num: GALIC GROUP FORMS RATE INCREASE FILING FOR 2015

Implementation On Approval

Date Requested:

Author(s): Deborah Keeler, Nicole Massey, Stephanie Entzminger, Benjamin Unterreiner, Hina Ahmad,

April Trusty

Reviewer(s): Jim Laverty (primary)

Disposition Date:
Disposition Status:
Implementation Date:

State Filing Description:

Proposed 30% increase on 4 Great American Life policy forms: 1LTCGP0001-PA & 1LTCGP0008-PA

State: Pennsylvania Filing Company: United Teacher Associates Insurance Company

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name: Long Term Care

Project Name/Number: GALIC Forms Rate Increase Filing for 2015/

General Information

Project Name: GALIC Forms Rate Increase Filing for 2015 Status of Filing in Domicile: Pending

Project Number: Date Approved in Domicile: Requested Filing Mode: Review & Approval Domicile Status Comments:

Explanation for Combination/Other: Market Type:

Submission Type: New Submission Overall Rate Impact: 30%

Filing Status Changed: 03/10/2016

State Status Changed: 03/15/2016 Deemer Date:

Created By: Benjamin Unterreiner Submitted By: Hina Ahmad

Corresponding Filing Tracking Number:

Filing Description:

Enclosed for your review and approval, please find copies of an Actuarial Memorandum and rate sheets in support of a proposed 30% rate increase on the above referenced Long Term Care insurance products.

The base rate increase applies to the base policy and all applicable benefit riders for which a premium is paid. The rate increase will be effective on the first premium due date subsequent to state insurance department approval and in accordance with state policyholder notification requirements, with the additional condition that no policyholder will receive a rate increase sooner than one year after receiving a prior rate increase, if applicable.

This filing applies to inforce policies issued in this state. The above referenced policy forms are Group Long Term Care insurance products, which are no longer being sold.

Enclosed are any necessary certifications, transmittals, and/or filing fees as may be required by your state. I hope that with this information your approval of this filing will be forthcoming. If you have any questions or need additional information, please feel free to contact me.

Company and Contact

Filing Contact Information

Hina Ahmad, Insurance Analyst Manager hahmad@gaig.com
11001 Lakeline Blvd. 512-410-0818 [Phone]
Suite 120 512-257-0218 [FAX]

Austin, TX 78717

Filing Company Information

United Teacher Associates CoCode: 63479 State of Domicile: Texas
Insurance Company Group Code: 84 Company Type: Life & Health

11001 Lakeline Blvd Group Name: State ID Number:

Suite 120 FEIN Number: 58-0869673

Austin, TX 78717

(866) 830-0607 ext. [Phone]

Filing Fees

Fee Required? Yes
Fee Amount: \$100.00

PDF Pipeline for SERFF Tracking Number GLTC-130340311 Generated 03/15/2016 02:15 PM

State: Pennsylvania Filing Company: United Teacher Associates Insurance Company

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name: Long Term Care

Project Name/Number: GALIC Forms Rate Increase Filing for 2015/

Retaliatory? Yes

Fee Explanation: UTA's state of domicile is Texas. Texas's fee for rate increase filings is \$100.

Per Company: Yes

Company Amount Date Processed Transaction #

United Teacher Associates Insurance Company \$100.00 03/08/2016 106914287

FILING F...

State: Pennsylvania Filing Company: United Teacher Associates Insurance Company

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name: Long Term Care

Project Name/Number: GALIC Forms Rate Increase Filing for 2015/

Rate Information

Rate data applies to filing.

Filing Method: SERFF

Rate Change Type: Increase

Overall Percentage of Last Rate Revision: 20.000%

Effective Date of Last Rate Revision: 07/09/2014

Filing Method of Last Filing: SERFF

Company Rate Information

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	Number of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where req'd):	Minimum % Change (where req'd):
United Teacher Associates Insurance Company	30.000%	30.000%	\$1,914	4	\$6,381	30.000%	30.000%

FILING F...

State: Pennsylvania Filing Company: United Teacher Associates Insurance Company

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name: Long Term Care

Project Name/Number: GALIC Forms Rate Increase Filing for 2015/

Rate/Rule Schedule

	em lo.	Schedule Item Status	Document Name	Affected Form Numbers (Separated with commas)	Rate Action	Rate Action Information	Attachments
1			GALIC 1LTCG Rate Sheets - PA Group	1LTCGP0001-PA, 1LTCGP0008-PA	Revised	Previous State Filing Number: GLTC-129208181 Percent Rate Change Request: 30	GALIC 1LTCG Rate Sheets - PA Group.pdf,

United Teacher Associates Insurance Company Long Term Care Form 1LTCGP0001-PA (Certificate 1LTCGP0002-PA) Base Premiums for: \$10/Day NH, HHC Daily Max = 100% of NH 0-Day Elimination Period Single Insured Annual Premiums *

				et. 15. 1. 1				
Issue Age	2-Year	3-Year	Bei <u>4-Year</u>	nefit Period 5-Year	6-Year	 <u>8-Year</u>	Lifetime	
Age	<u>2-1 car</u>	<u>3-1 car</u>	4-1 car	<u>3-16a1</u>	0-1 car	<u> </u>	Litetine	
<38	23	26	29	31	34	37	42	* Joint applicants receive
38	24	28	30	32	36	40	44	15% discount.
39	25	29	32	34	37	42	47	
40	26	30	34	36	40	44	49	
41	28	32	35	37	41	46	52	
42	29	34	37	40	43	48	54	Modal Factors
43 44	30 32	35 37	40 42	42 44	46 49	52 55	58 62	Monthly: 0.09 Quarterly: 0.2625
45	34	40	44	47	52	58	66	Semiannual: 0.525
46	36	42	47	49	55	61	70	Johnson Vio 20
47	37	44	49	53	58	65	73	
48	38	46	50	54	60	66	76	
49	40	47	52	55	61	68	78	
50	41	48	53	58	64	71	80	
51	42	49	55	59	65	73	83	
52	42	50	56	61	67	76	85	
53	44	54	60	65	71	79	90	
54	47	56	64	68	76	84	95	
55	49	60	66	72	79	88	100	
56 57	52 54	62	70	74	83	92 97	104	
58	60	66 72	73 80	78 86	86 96	107	109 120	
59	66	79	89	95	106	118	132	
60	72	86	96	103	114	127	143	
61	77	94	104	112	124	138	155	
62	83	100	112	120	133	148	166	
63	91	109	122	131	144	161	180	
64	98	119	132	142	156	174	193	
65	106	127	142	152	168	187	208	
66	114	137	152	163	180	199	221	
67	121	146	162	174	191	212	235	
68	136	163	182	194	215	238	263	
69	150	181	202	216	238	264	292	
70	164	199	222	238	262	290	319	
71 72	179 194	216 234	241 262	258 280	284 308	316 342	347 376	
73	229	277	310	331	364	403	443	
74	264	319	356	382	420	466	509	
75	299	362	404	433	476	527	576	
76	335	406	452	484	532	589	643	
77	370	448	500	535	588	650	709	
78	410	498	556	594	653	722	787	
79	450	547	612	654	719	796	864	
80	491	596	667	713	785	868	941	
81	532	647	722	773	850	940	1,018	
82	572	696	779	832	916	1,012	1,096	
83	616	750	838	894	984	1,087	1,175	
84 85	660 704	803 856	896 955	956 1,019	1,052	1,163 1,238	1,255	
86	748	910	1,014	1,019	1,121 1,190	1,236	1,336 1,416	
87	792	962	1,073	1,144	1,259	1,390	1,496	
88	826	1,001	1,114	1,187	1,306	1,441	1,550	
89	860	1,039	1,154	1,229	1,351	1,494	1,604	
90	894	1,078	1,195	1,271	1,398	1,546	1,658	
91	928	1,116	1,235	1,313	1,445	1,597	1,712	
92	962	1,154	1,276	1,355	1,492	1,649	1,766	
93	983	1,177	1,300	1,380	1,519	1,681	1,800	
94	1,003	1,200	1,324	1,404	1,546	1,712	1,832	
95	1,025	1,223	1,346	1,429	1,573	1,744	1,866	
96	1,045	1,244	1,370	1,454	1,601	1,776	1,900	
97+	1,066	1,267	1,394	1,478	1,628	1,807	1,932	

United Teacher Associates Insurance Company Long Term Care Form 1LTCGP0001-PA (Certificate 1LTCGP0002-PA) Base Premiums for: \$50,000 Pool of Money, HHC Daily Max = 100% of NH 0-Day Elimination Period Single Insured Annual Premiums *

Issue <u>Age</u>	 \$75/Day	Daily Max \$100/Day	\$125/Day	
Age	<u>\$13/Day</u>	\$100/Day	<u>\$125/Day</u>	
<38	192	203	211	* Joint applicants receive
38	199	212	222	15% discount.
39	208	221	232	
40	216	230	241	
41	223	239	251	
42	232	248	260	Modal Factors
43	244	262	275	Monthly: 0.09
44	256	276	290	Quarterly: 0.2625
45	268	289	305	Semiannual: 0.525
46	281	304	319	
47	293	317	335	
48	299	325	343	
49	306	334	353	
50	313	342	361	
51	320	349	371	
52	326	358	379	
53	344	377	401	
54	361	397	421	
55	379	416	443	
56	396	436	463	
57	414	456	485	
58	454	502	534	
59	494	547	583	
60	535	593	632	
61	575	640	682	
62	616	685	731	
63	676	751	800	
64	736	817	870	
65	796	883	940	
66	857	949	1,009	
67	917	1,015	1,079	
68	1,021	1,133	1,204	
69	1,126	1,250	1,330	
70	1,230	1,368	1,454	
71 72	1,334	1,486	1,580	
	1,439	1,603	1,705	
73 74	1,700	1,891	2,011	
74 75	1,961 2,222	2,180 2,468	2,316 2,621	
76	2,483	2,758	2,926	
77	2,744	3,046	3,232	
78	3,038	3,372	3,576	
79	3,334	3,698	3,922	
80	3,628	4,025	4,267	
81	3,923	4,351	4,613	
82	4,217	4,678	4,957	
83	4,536	5,034	5,338	
84	4,854	5,390	5,718	
85	5,173	5,748	6,098	
86	5,491	6,104	6,479	
87	5,810	6,462	6,859	
88	6,061	6,752	7,172	
89	6,313	7,043	7,486	
90	6,564	7,333	7,799	
91	6,815	7,624	8,112	
92	7,067	7,914	8,425	
93	7,223	8,102	8,630	
94	7,379	8,291	8,834	
95	7,535	8,480	9,038	
96	7,691	8,669	9,244	
97+	7,848	8,857	9,448	

United Teacher Associates Insurance Company Long Term Care Form 1LTCGP0001-PA (Certificate 1LTCGP0002-PA) Base Premiums for: \$75,000 Pool of Money,HHC Daily Max = 100% of NH 0-Day Elimination Period Single Insured Annual Premiums *

Issue			Daily	Mov			
Age	\$75/Day	\$100/Day	\$125/Day	\$150/Day	\$175/Day	\$200/Day	
							
<38	216	232	244	252	262	269	* Joint applicants receive
38	226	244	256	265	276	284	15% discount.
39	235	254	269	278	290	299	
40	245	266	281	290	304	313	
41 42	256 265	277	294	304	318	328 342	Modal Factors
42	281	289 306	306 325	317 337	332 353	365	Monthly: 0.09
44	295	324	343	358	374	386	Quarterly: 0.2625
45	311	341	362	377	396	409	Semiannual: 0.525
46	325	359	382	397	418	431	
47	341	376	401	418	438	454	
48	350	386	413	431	452	468	
49	359	398	425	443	467	484	
50	368	409	437	456	481	498	
51	377	420	450	469	496	514	
52	386	431	462	482	510	528	
53	408	456	488	510	540	559	
54	428	480	515	539	569	590	
55	450	504	541	566	599	622	
56	472	529	568	594	629	652	
57	492	553	594	622	659	683	
58 59	542 592	611 668	656 719	688 754	728 799	756 829	
60	642	726	781	820	870	902	
61	692	782	844	886	941	976	
62	742	840	906	950	1,010	1,050	
63	812	919	990	1,038	1,103	1,144	
64	882	997	1,074	1,124	1,194	1,238	
65	953	1,076	1,158	1,212	1,286	1,333	
66	1,024	1,154	1,241	1,298	1,378	1,428	
67	1,093	1,232	1,325	1,385	1,470	1,523	
68	1,222	1,380	1,483	1,550	1,646	1,706	
69	1,350	1,526	1,642	1,716	1,823	1,889	
70	1,478	1,673	1,800	1,880	1,999	2,072	
71	1,607	1,819	1,958	2,046	2,176	2,255	
72	1,735	1,966	2,116	2,212	2,352	2,438	
73	2,052	2,323	2,498	2,606	2,772	2,872	
74 75	2,369 2,686	2,680 3,037	2,881 3,264	3,002 3,397	3,192 3,611	3,305 3,738	
76	3,002	3,394	3,647	3,793	4,031	4,171	
77	3,318	3,751	4,030	4,188	4,451	4,604	
78	3,682	4,162	4,470	4,640	4,932	5,102	
79	4,044	4,572	4,912	5,093	5,414	5,599	
80	4,406	4,982	5,352	5,545	5,896	6,097	
81	4,770	5,393	5,794	5,998	6,378	6,594	
82	5,132	5,803	6,234	6,450	6,859	7,091	
83	5,520	6,251	6,721	6,950	7,394	7,646	
84	5,908	6,697	7,207	7,451	7,930	8,202	
85	6,295	7,144	7,694	7,950	8,465	8,758	
86	6,683	7,591	8,182	8,450	9,000	9,312	
87	7,070	8,038	8,668	8,951	9,535	9,868	
88 89	7,357 7,643	8,381 8,724	9,052 9,436	9,354 9,757	9,971 10,406	10,324 10,778	
90	7,043	9,067	9,430	10,162	10,400	11,234	
91	8,215	9,410	10,204	10,162	11,276	11,689	
92	8,502	9,754	10,588	10,969	11,712	12,145	
93	8,674	9,964	10,828	11,228	11,993	12,442	
94	8,844	10,175	11,068	11,489	12,274	12,738	
95	9,016	10,385	11,306	11,748	12,556	13,036	
96	9,187	10,596	11,546	12,008	12,836	13,332	
97+	9,358	10,806	11,785	12,268	13,118	13,628	

United Teacher Associates Insurance Company Long Term Care Form 1LTCGP0001-PA (Certificate 1LTCGP0002-PA) Base Premiums for: \$100,000 Pool of Money, HHC Daily Max = 100% of NH 0-Day Elimination Period Single Insured Annual Premiums *

Issue			Daily l	May			
Age	\$75/Day	\$100/Day	\$125/Day	\$150/Day	\$175/Day	\$200/Day	
	********					<u></u>	
<38	234	254	272	284	295	307	* Joint applicants receive
38	245	268	287	300	312	325	15% discount.
39	257	281	301	316	329	343	
40	268	294	317	332	346	361	
41 42	280 290	307	331	348	362 379	379 397	Modal Factors
43	308	320 341	346 368	364 388	406	425	Monthly: 0.09
44	325	361	391	412	431	452	Quarterly: 0.2625
45	342	380	413	437	456	479	Semiannual: 0.525
46	360	401	436	461	482	506	
47	377	421	458	485	508	534	
48	388	434	473	502	526	553	
49	398	448	488	517	542	572	
50	409	461	504	534	560	590	
51	420	473	518	551	578	610	
52	430	486	534	568	596	629	
53	454	515	565	601	631	667	
54	478	542	596	635	667	706	
55	502	570	628	668	703	744	
56	526	598	659	702	738	781	
57 58	550 606	626 692	690	736 815	774 858	820 911	
59	662	758	764 839	894	943	1,001	
60	719	824	913	974	1,027	1,001	
61	775	890	988	1,054	1,111	1,182	
62	832	956	1,062	1,134	1,196	1,272	
63	908	1,044	1,158	1,236	1,303	1,386	
64	986	1,132	1,255	1,338	1,410	1,500	
65	1,063	1,220	1,351	1,440	1,517	1,614	
66	1,141	1,308	1,448	1,542	1,625	1,728	
67	1,218	1,396	1,544	1,644	1,732	1,842	
68	1,363	1,564	1,733	1,844	1,944	2,069	
69	1,508	1,732	1,920	2,045	2,155	2,296	
70	1,652	1,900	2,108	2,245	2,368	2,522	
71	1,798	2,068	2,297	2,446	2,579	2,749	
72 73	1,942 2,298	2,236 2,644	2,484 2,935	2,646 3,126	2,791 3,294	2,976 3,511	
74	2,653	3,052	3,386	3,605	3,798	4,046	
75	3,008	3,460	3,839	4,084	4,301	4,580	
76	3,364	3,868	4,290	4,562	4,805	5,116	
77	3,719	4,274	4,741	5,041	5,308	5,651	
78	4,129	4,748	5,266	5,598	5,896	6,272	
79	4,538	5,221	5,790	6,156	6,482	6,894	
80	4,948	5,694	6,314	6,713	7,069	7,516	
81	5,357	6,167	6,839	7,271	7,656	8,137	
82	5,766	6,640	7,363	7,828	8,244	8,758	
83	6,198	7,150	7,936	8,443	8,897	9,450	
84	6,629	7,658	8,509	9,059	9,551	10,142	
85 86	7,061 7,492	8,168 8,677	9,082 9,654	9,674 10,290	10,205 10,858	10,835 11,526	
87	7,432	9,186	10,226	10,290	11,512	12,218	
88	8,227	9,559	10,661	11,382	12,029	12,774	
89	8,532	9,934	11,095	11,860	12,545	13,331	
90	8,836	10,307	11,528	12,336	13,061	13,886	
91	9,140	10,680	11,963	12,814	13,578	14,443	
92	9,445	11,053	12,397	13,291	14,094	14,999	
93	9,623	11,275	12,660	13,584	14,417	15,355	
94	9,800	11,497	12,923	13,877	14,740	15,710	
95	9,978	11,719	13,187	14,170	15,062	16,066	
96	10,156	11,941	13,450	14,462	15,385	16,421	
97+	10,333	12,163	13,714	14,755	15,708	16,776	

United Teacher Associates Insurance Company Long Term Care Form 1LTCGP0001-PA (Certificate 1LTCGP0002-PA) Base Premiums for: \$150,000 Pool of Money, HHC Daily Max = 100% of NH 0-Day Elimination Period Single Insured Annual Premiums *

Issue							
Age	\$75/Day	\$100/Day	Daily 1 <u>\$125/Day</u>	\$150/Day	\$175/Day	\$200/Day	
<38	266	289	314	328	346	362	* Joint applicants receive
38	281	306	332	347	367	384	15% discount.
39	294	322	350	366	388	407	
40	308	338	370	386	409	430	
41	322	354	388	406	430	452	M LIE
42	336	370	406	425	451	474	Modal Factors
43 44	356 377	394 419	433 461	455 484	482 515	509 542	Monthly: 0.09 Quarterly: 0.2625
45	397	443	488	514	547	576	Semiannual: 0.525
46	418	467	516	542	578	611	beimainaan 0.020
47	439	491	544	572	611	644	
48	451	506	563	593	634	670	
49	464	523	581	613	655	694	
50	478	539	600	634	678	718	
51	491	556	619	654	701	743	
52	504	571	638	674	724	767	
53	532	605	677	715	768	814	
54	560	637	714	755	811	860	
55 56	588 617	671 703	752 790	796 835	854 899	907 955	
57	644	703	828	875	942	1,002	
58	712	816	918	971	1,046	1,114	
59	778	894	1,009	1,067	1,151	1,225	
60	845	973	1,099	1,163	1,255	1,337	
61	911	1,051	1,189	1,259	1,360	1,450	
62	978	1,130	1,280	1,355	1,465	1,561	
63	1,067	1,232	1,394	1,475	1,592	1,698	
64	1,156	1,333	1,508	1,594	1,721	1,834	
65	1,244	1,435	1,622	1,712	1,849	1,970	
66	1,333	1,536	1,736	1,832	1,978	2,106	
67	1,422	1,638	1,850	1,951	2,106	2,243	
68 69	1,591 1,762	1,838 2,039	2,080	2,191 2,431	2,366 2,628	2,522 2,801	
70	1,702	2,239	2,309 2,538	2,431	2,888	3,080	
71	2,101	2,438	2,767	2,912	3,149	3,359	
72	2,272	2,639	2,995	3,152	3,410	3,638	
73	2,686	3,121	3,544	3,724	4,026	4,296	
74	3,100	3,605	4,091	4,295	4,643	4,954	
75	3,514	4,087	4,638	4,866	5,260	5,611	
76	3,928	4,570	5,185	5,437	5,875	6,269	
77	4,343	5,052	5,734	6,008	6,492	6,926	
78	4,820	5,615	6,374	6,678	7,213	7,698	
79	5,298	6,176	7,015	7,346	7,934	8,470	
80 81	5,776 6,253	6,739 7,301	7,657 8,298	8,015 8,683	8,656 9,377	9,241 10,013	
82	6,731	7,864	8,939	9,352	10,098	10,783	
83	7,229	8,456	9,625	10,078	10,886	11,636	
84	7,727	9,050	10,310	10,804	11,676	12,488	
85	8,225	9,643	10,997	11,528	12,466	13,340	
86	8,723	10,237	11,683	12,254	13,254	14,192	
87	9,221	10,831	12,368	12,979	14,044	15,044	
88	9,559	11,239	12,854	13,507	14,633	15,691	
89	9,898	11,648	13,342	14,035	15,223	16,337	
90	10,236	12,058	13,828	14,564	15,812	16,984	
91	10,576	12,466	14,315	15,092	16,402	17,629	
92 93	10,914 11,113	12,875 13,112	14,801 15,084	15,620 15,931	16,991 17,346	18,276 18,668	
93	11,113	13,112	15,368	16,243	17,340	19,060	
95	11,514	13,588	15,653	16,555	18,055	19,452	
96	11,713	13,825	15,936	16,867	18,409	19,843	
97+	11,912	14,063	16,220	17,179	18,764	20,236	

United Teacher Associates Insurance Company Long Term Care Form 1LTCGP0001-PA (Certificate 1LTCGP0002-PA) Base Premiums for: \$250,000 Pool of Money, HHC Daily Max = 100% of NH 0-Day Elimination Period Single Insured Annual Premiums *

Issue			Daily I	Max			
Age	\$75/Day	\$100/Day	\$125/Day	\$150/Day	\$175/Day	\$200/Day	
<38	262	296	314	329	350	370	* Joint applicants receive
38	276	313	333	350	372	394	15% discount.
39	289	330	352	371	395	419	
40	303	347	371	391	417	443	
41	317	365	390	412	440	467	
42	331	382	410	432	462	491	Modal Factors
43 44	352 372	407 432	438 467	463 494	496 530	528 564	Monthly: 0.09 Quarterly: 0.2625
45	393	458	495	525	563	601	Semiannual: 0.525
46	413	483	524	556	597	638	50mamaa. 0.525
47	434	509	552	587	631	674	
48	447	526	572	609	655	701	
49	460	543	591	631	679	727	
50	472	560	611	653	704	754	
51	485	576	631	674	728	781	
52	498	593	650	696	752	807	
53	526	628	689	738	798	857	
54	553	662	728	780	843	907	
55 56	581 608	696 730	766 805	821 863	889 934	956 1,006	
57	636	764	843	905	980	1,000	
58	701	846	935	1,005	1,089	1,174	
59	766	927	1,027	1,105	1,199	1,293	
60	832	1,008	1,119	1,205	1,308	1,412	
61	897	1,090	1,210	1,305	1,417	1,531	
62	962	1,171	1,302	1,404	1,527	1,650	
63	1,047	1,273	1,415	1,526	1,658	1,792	
64	1,133	1,376	1,528	1,647	1,789	1,933	
65	1,218	1,478	1,641	1,768	1,920	2,075	
66	1,304	1,580	1,754	1,889	2,051	2,216	
67	1,389	1,683	1,867	2,011	2,183	2,358	
68 69	1,554 1,720	1,888 2,093	2,098 2,329	2,261 2,512	2,456 2,730	2,655 2,953	
70	1,885	2,298	2,560	2,763	3,004	3,250	
71	2,050	2,503	2,791	3,014	3,278	3,547	
72	2,216	2,709	3,022	3,265	3,552	3,844	
73	2,616	3,201	3,573	3,860	4,198	4,544	
74	3,017	3,693	4,123	4,455	4,844	5,243	
75	3,417	4,185	4,673	5,050	5,491	5,942	
76	3,818	4,677	5,223	5,645	6,137	6,641	
77	4,219	5,169	5,773	6,240	6,784	7,340	
78	4,680	5,743	6,418	6,941	7,546	8,165	
79	5,142 5,603	6,318	7,063	7,641	8,308 9,070	8,990	
80 81	6,065	6,893 7,467	7,708 8,352	8,342 9,042	9,070	9,814 10,639	
82	6,526	8,042	8,997	9,742	10,593	11,464	
83	7,007	8,646	9,676	10,485	11,407	12,350	
84	7,487	9,250	10,355	11,227	12,220	13,236	
85	7,967	9,854	11,034	11,970	13,033	14,123	
86	8,447	10,458	11,712	12,712	13,847	15,009	
87	8,927	11,062	12,391	13,455	14,660	15,895	
88	9,256	11,475	12,848	13,957	15,218	16,515	
89	9,586	11,888	13,304	14,460	15,775	17,135	
90	9,915	12,301	13,760	14,962	16,333	17,754	
91	10,245	12,714	14,216	15,464	16,891	18,374 18,994	
92 93	10,574 10,777	13,127 13,376	14,673 14,939	15,966 16,255	17,448 17,770	19,352	
93	10,777	13,625	15,206	16,543	18,091	19,332	
95	11,181	13,874	15,472	16,832	18,412	20,069	
96	11,383	14,123	15,738	17,120	18,734	20,427	
97+	11,585	14,372	16,005	17,408	19,055	20,785	

United Teacher Associates Insurance Company Long Term Care Form 1LTCGP0001-PA (Certificate 1LTCGP0002-PA) Base Premiums for: \$10/Day NH, HHC Daily Max = 100% of NH 0-Day Elimination Period Single Insured Annual Premiums *

			D	64 D!1				
Issue Age	2-Year	3-Year	вег <u>4-Year</u>	nefit Period <u>5-Year</u>	6-Year	 <u>8-Year</u>	Lifetime	
Age	2-1 car	<u>5-1car</u>	4-1 car	<u>5-1car</u>	<u>o-rear</u>	<u>o-rear</u>	Litetine	
<38	30	34	37	41	44	48	55	* Joint applicants receive
38	31	36	39	42	47	51	58	15% discount.
39	33	37	42	44	48	55	61	
40	34	39	44	47	51	58	64	
41	36	42	45	48	53	59	67	M 11E /
42 43	37 39	44 45	48 51	51 55	56 59	62 67	70 75	Modal Factors Monthly: 0.09
44	42	48	55	58	64	72	81	Quarterly: 0.2625
45	44	51	58	61	67	75	86	Semiannual: 0.525
46	47	55	61	64	72	80	90	
47	48	58	64	69	75	84	95	
48	50	59	66	70	78	86	98	
49	51	61	67	72	80	89	101	
50	53	62	69	75	83	92	105	
51	55	64	72	76	84	95	108	
52 53	55 58	66 70	73 78	80 84	87 92	98 103	111 117	
54	61	73	83	89	98	103	123	
55	64	78	86	94	103	114	129	
56	67	81	90	97	108	120	136	
57	70	86	95	101	112	126	142	
58	78	94	105	112	125	139	156	
59	86	103	115	123	137	153	172	
60	94	112	125	134	148	165	186	
61	100	122	136	145	161	179	201	
62	108	129	145	156	173	192	215	
63	119	142	159	170	187	209	234	
64 65	128 137	154 165	172 184	184 198	203 218	226 243	251 270	
66	148	178	198	212	234	259	287	
67	158	190	211	226	248	276	306	
68	176	212	237	253	279	309	342	
69	195	236	262	281	309	343	379	
70	214	259	289	309	340	378	415	
71	232	281	314	335	370	410	451	
72	253	304	340	363	401	445	488	
73	298	360	402	431	473	524	576	
74 75	343 388	415 471	463 526	496 563	546 619	605 685	661 749	
75 76	435	527	588	629	691	766	836	
77	480	582	651	696	764	846	922	
78	534	647	722	772	849	939	1,023	
79	585	711	796	850	934	1,034	1,123	
80	638	775	867	927	1,020	1,128	1,223	
81	691	841	939	1,005	1,104	1,221	1,323	
82	744	905	1,012	1,081	1,190	1,315	1,424	
83	800	975	1,089	1,162	1,279	1,413	1,527	
84 85	858 916	1,044 1,112	1,165 1,242	1,243 1,324	1,368 1,457	1,512 1,610	1,632 1,736	
86	972	1,112	1,318	1,406	1,548	1,708	1,730	
87	1,030	1,251	1,395	1,487	1,636	1,806	1,945	
88	1,073	1,301	1,448	1,543	1,697	1,874	2,016	
89	1,119	1,351	1,501	1,597	1,757	1,942	2,086	
90	1,162	1,401	1,554	1,652	1,817	2,009	2,156	
91	1,206	1,451	1,605	1,707	1,878	2,076	2,226	
92	1,251	1,501	1,658	1,761	1,939	2,143	2,296	
93	1,278	1,530	1,689	1,794	1,975	2,186	2,340	
94	1,304	1,560	1,721	1,825	2,009	2,226	2,382	
95 96	1,332 1,359	1,590 1,618	1,750 1,782	1,858 1,891	2,045 2,081	2,267 2,309	2,426 2,469	
96 97+	1,385	1,618	1,782	1,891	2,081	2,349	2,469	
27.5	1,505	1,047	1,010	1,744	2,11/	2,547	2,312	

United Teacher Associates Insurance Company Long Term Care Form 1LTCGP0001-PA (Certificate 1LTCGP0002-PA) Base Premiums for: \$50,000 Pool of Money, HHC Daily Max = 100% of NH 0-Day Elimination Period Single Insured Annual Premiums *

		D 2 M		
Issue	\$75 (D	Daily Max -	\$125/D	
<u>Age</u>	<u>\$75/Day</u>	<u>\$100/Day</u>	<u>\$125/Day</u>	
<38	250	264	275	* Joint applicants receive
38	259	276	289	15% discount.
39	270	287	301	
40	281	300	314	
41	290	310	326	
42	301	323	339	Modal Factors
43	317	340	357	Monthly: 0.09
44	332	359	378	Quarterly: 0.2625
45	348	376	396	Semiannual: 0.525
46	365	395	415	
47	381	412	435	
48	388	423	446	
49	398	434	459	
50	407	445	470	
51	417	454	482	
52	424	465	493	
53	448	490	521	
54	470	516	548	
55	493	541	576	
56	515	566	602	
57	538	593	630	
58	590	652	694	
59	643	711	758	
60	696	771	822	
61	747	831	886	
62	800	891	950	
63	878	977	1,041	
64	956	1,062	1,131	
65 66	1,034	1,148	1,221	
67	1,114 1,192	1,234 1,320	1,312 1,402	
68	1,328	1,473	1,565	
69	1,463	1,626	1,728	
70	1,599	1,778	1,891	
71	1,735	1,931	2,055	
72	1,870	2,084	2,217	
73	2,211	2,459	2,615	
74	2,549	2,835	3,011	
75	2,889	3,209	3,407	
76	3,228	3,585	3,803	
77	3,568	3,959	4,201	
78	3,950	4,384	4,649	
79	4,334	4,808	5,098	
80	4,716	5,232	5,547	
81	5,100	5,657	5,997	
82	5,482	6,081	6,444	
83	5,897	6,544	6,939	
84	6,310	7,008	7,433	
85	6,725	7,472	7,928	
86	7,139	7,936	8,422	
87	7,554	8,401	8,917	
88	7,880	8,778	9,324	
89	8,207	9,156	9,731	
90	8,533	9,533	10,138	
91	8,859	9,911	10,546	
92	9,187	10,288	10,953	
93	9,390	10,533	11,220	
94	9,592	10,778	11,485	
95 96	9,795 9,998	11,025	11,750	
96 97+		11,269	12,017	
9/+	10,202	11,514	12,282	

United Teacher Associates Insurance Company Long Term Care Form 1LTCGP0001-PA (Certificate 1LTCGP0002-PA) Base Premiums for: \$75,000 Pool of Money,HHC Daily Max = 100% of NH 0-Day Elimination Period Single Insured Annual Premiums *

			D 11 1				
Issue	4== 0	#100 /P	Daily I			4400 m	
Age	<u>\$75/Day</u>	\$100/Day	\$125/Day	\$150/Day	\$175/Day	\$200/Day	
<38	281	301	317	328	340	349	* Joint applicants receive
38	293	317	332	345	359	370	15% discount.
39	306	331	349	362	378	388	
40	318	346	365	378	395	407	
41	332	360	382	395	413	426	
42	345	376	398	412	432	445	Modal Factors
43	365	398	423	438	459	474	Monthly: 0.09
44	384	421	446	465	487	502	Quarterly: 0.2625
45	404	443	471	490	515	532	Semiannual: 0.525
46	423	466	496	516	543	560	
47	443	488	521	543	569	590	
48	456	502	537	560	588	608	
49	466	518	552	576	607	629	
50	479	532	568	593	626	647	
51	490	546	585	610	644	668	
52	502	560	601	627	663	686	
53	530	593	635	663	702	727	
54	557	624	669	700	739	768	
55	585	655	704	736	778	808	
56	613	688	738	772	817	847	
57	640	719	772	808	856	888	
58	705	794	853	894	947	983	
59	769	869	934	980	1,039	1,078	
60	835	944	1,016	1,065	1,131	1,173	
61	900	1,017	1,097	1,151	1,223	1,268	
62	964	1,092	1,178	1,236	1,314	1,365	
63 64	1,056 1,147	1,195 1,296	1,287 1,396	1,349 1,462	1,434 1,552	1,487 1,610	
65	1,239	1,399	1,505	1,576	1,672	1,733	
66	1,331	1,501	1,613	1,688	1,791	1,856	
67	1,421	1,602	1,722	1,800	1,911	1,980	
68	1,588	1,794	1,928	2,016	2,140	2,218	
69	1,755	1,984	2,134	2,231	2,370	2,455	
70	1,922	2,175	2,340	2,445	2,599	2,694	
71	2,089	2,365	2,546	2,660	2,828	2,931	
72	2,256	2,555	2,750	2,875	3,058	3,170	
73	2,668	3,020	3,248	3,388	3,604	3,733	
74	3,079	3,483	3,746	3,903	4,150	4,296	
75	3,491	3,948	4,243	4,416	4,694	4,859	
76	3,903	4,412	4,741	4,931	5,240	5,423	
77	4,313	4,877	5,238	5,444	5,786	5,986	
78	4,786	5,410	5,811	6,033	6,412	6,633	
79	5,257	5,944	6,385	6,621	7,039	7,279	
80	5,728	6,477	6,958	7,209	7,664	7,926	
81	6,201	7,011	7,532	7,797	8,291	8,572	
82	6,672	7,544	8,104	8,385	8,917	9,218	
83	7,176	8,126	8,738	9,036	9,613	9,940	
84	7,680	8,706	9,369	9,686	10,308	10,663	
85	8,184	9,287	10,003	10,335	11,004	11,385	
86	8,688	9,869	10,636	10,986	11,700	12,106	
87	9,192	10,449	11,268	11,636	12,396	12,828	
88	9,564	10,895	11,767	12,160	12,962	13,421	
89	9,936	11,341	12,266	12,684	13,528	14,012	
90	10,308	11,787	12,765	13,210	14,093	14,605	
91 92	10,680 11,053	12,234 12,680	13,265 13,764	13,734 14,260	14,659	15,196 15,789	
92	11,055	12,953	14,076	14,260	15,226 15,591	15,789	
93 94	11,276	13,227	14,388	14,935	15,956	16,174	
95	11,720	13,500	14,588	15,272	16,322	16,946	
96	11,943	13,775	15,010	15,611	16,687	17,332	
97+	12,165	14,048	15,321	15,948	17,054	17,717	
· · ·	. 2,103	2 1,040	,	10,740	1,,057	.,,/1/	

United Teacher Associates Insurance Company Long Term Care Form 1LTCGP0001-PA (Certificate 1LTCGP0002-PA) Base Premiums for: \$100,000 Pool of Money, HHC Daily Max = 100% of NH 0-Day Elimination Period Single Insured Annual Premiums *

Issue Daily Max								
Age	\$75/Day	\$100/Day	\$125/Day	\$150/Day	\$175/Day	\$200/Day		
<38	304	331	354	370	384	399	* Joint applicants receive	
38	318	348	373	390	406	423	15% discount.	
39	334	365	392	410	427	446		
40	348	382	412	432	449	470		
41	363	399	431	452	471	493		
42	378	417	449	473	493	516	Modal Factors	
43	401	443	479	504	527	552	Monthly: 0.09	
44	423	470	509	535	560	588	Quarterly: 0.2625	
45 46	445 468	495 521	537 566	568 599	593 627	622 658	Semiannual: 0.525	
47	490	548	596	630	660	694		
48	504	565	615	652	683	719		
49	518	582	635	672	705	744		
50	532	599	655	694	729	768		
51	546	615	674	716	752	792		
52	558	632	694	738	775	817		
53	590	669	735	782	821	867		
54	621	705	775	825	867	917		
55	652	741	816	869	914	967		
56	683	777	856	913	959	1,016		
57 58	714 788	814 900	897 994	956 1,059	1,006 1,115	1,065 1,184		
59	861	986	1,090	1,162	1,113	1,301		
60	934	1,072	1,187	1,267	1,335	1,418		
61	1,008	1,158	1,284	1,370	1,445	1,537		
62	1,081	1,243	1,381	1,474	1,555	1,654		
63	1,181	1,357	1,505	1,607	1,694	1,802		
64	1,282	1,471	1,632	1,739	1,833	1,950		
65	1,382	1,587	1,757	1,872	1,972	2,098		
66	1,484	1,700	1,883	2,005	2,112	2,246		
67	1,583	1,814	2,008	2,137	2,251	2,395		
68	1,772	2,033	2,253	2,398	2,527	2,689		
69 70	1,961 2,148	2,251 2,469	2,496 2,741	2,658 2,919	2,802 3,078	2,984 3,279		
71	2,337	2,688	2,741	3,179	3,352	3,574		
72	2,524	2,906	3,229	3,440	3,629	3,869		
73	2,987	3,437	3,816	4,064	4,282	4,565		
74	3,449	3,967	4,402	4,686	4,937	5,260		
75	3,911	4,497	4,990	5,309	5,591	5,955		
76	4,373	5,028	5,577	5,931	6,246	6,650		
77	4,834	5,557	6,164	6,554	6,900	7,346		
78	5,368	6,173	6,845	7,277	7,664	8,154		
79	5,900	6,788	7,527	8,003	8,427	8,962		
80 81	6,432 6,964	7,402 8,017	8,209 8,890	8,727 9,452	9,190 9,953	9,770 10,578		
82	7,496	8,631	9,572	10,176	10,717	11,385		
83	8,057	9,294	10,316	10,976	11,566	12,285		
84	8,617	9,956	11,062	11,776	12,416	13,185		
85	9,179	10,619	11,806	12,577	13,266	14,085		
86	9,739	11,280	12,550	13,377	14,115	14,984		
87	10,301	11,942	13,294	14,177	14,965	15,884		
88	10,695	12,427	13,859	14,797	15,637	16,606		
89	11,092	12,914	14,424	15,417	16,308	17,330		
90	11,486	13,399	14,987	16,037	16,979	18,052		
91	11,883	13,884	15,552	16,658	17,651	18,776		
92 93	12,279 12,510	14,369 14,658	16,116 16,458	17,279 17,659	18,322 18,742	19,498 19,962		
93	12,510	14,038	16,438	18,040	18,742	20,424		
95	12,741	15,235	17,143	18,420	19,581	20,885		
96	13,202	15,524	17,484	18,801	20,001	21,347		
97+	13,433	15,812	17,828	19,182	20,420	21,809		

United Teacher Associates Insurance Company Long Term Care Form 1LTCGP0001-PA (Certificate 1LTCGP0002-PA) Base Premiums for: \$150,000 Pool of Money, HHC Daily Max = 100% of NH 0-Day Elimination Period Single Insured Annual Premiums *

			D 11 1				
Issue	4===	4100 m	Daily I			4200 T	
Age	\$75/Day	\$100/Day	\$125/Day	\$150/Day	<u>\$175/Day</u>	\$200/Day	
<38	346	376	409	426	449	471	* Joint applicants receive
38	365	398	432	451	477	499	15% discount.
39	382	418	456	476	504	529	
40	401	440	480	502	532	558	
41	418	460	504	527	558	588	
42	437	480	527	552	587	616	Modal Factors
43	463	512	563	591	627	661	Monthly: 0.09
44	490	544	599	629	669	705	Quarterly: 0.2625
45	516	576	635	668	711	749	Semiannual: 0.525
46	543	607	671	705	752 794	794	
47 48	571 587	638 658	707 732	744 771	794 824	838 870	
49	604	680	755	771	852 852	902	
50	621	700	780	824	881	933	
51	638	722	805	850	911	966	
52	655	743	830	877	941	997	
53	691	786	880	930	998	1,058	
54	729	828	928	981	1,055	1,119	
55	764	872	978	1,034	1,111	1,179	
56	802	914	1,026	1,086	1,168	1,242	
57	838	958	1,076	1,137	1,225	1,303	
58	925	1,061	1,193	1,262	1,360	1,448	
59	1,011	1,162	1,312	1,387	1,496	1,593	
60	1,098	1,265	1,429	1,512	1,632	1,738	
61	1,184	1,367	1,546	1,636	1,767	1,884	
62	1,271	1,470	1,665	1,761	1,905	2,030	
63	1,387	1,602	1,813	1,917	2,070	2,207	
64 65	1,502 1,618	1,733 1,866	1,961 2,109	2,072 2,226	2,237 2,404	2,384 2,562	
66	1,733	1,997	2,109	2,382	2,571	2,738	
67	1,849	2,129	2,406	2,537	2,738	2,916	
68	2,069	2,390	2,703	2,849	3,076	3,279	
69	2,290	2,650	3,001	3,161	3,416	3,641	
70	2,512	2,911	3,299	3,473	3,755	4,005	
71	2,732	3,170	3,597	3,786	4,093	4,366	
72	2,953	3,430	3,894	4,098	4,434	4,730	
73	3,491	4,058	4,607	4,841	5,234	5,585	
74	4,029	4,686	5,318	5,583	6,036	6,440	
75	4,568	5,313	6,029	6,326	6,837	7,295	
76	5,106	5,940	6,741	7,068	7,638	8,149	
77 78	5,646	6,568	7,454	7,811	8,440	9,004 10,007	
78 79	6,267 6,887	7,299 8,029	8,287 9,120	8,681 9,550	9,377 10,315	11,010	
80	7,508	8,761	9,954	10,419	11,252	12,014	
81	8,129	9,491	10,787	11,288	12,190	13,017	
82	8,750	10,223	11,620	12,157	13,127	14,018	
83	9,397	10,993	12,513	13,101	14,152	15,127	
84	10,045	11,766	13,404	14,045	15,179	16,235	
85	10,692	12,536	14,296	14,987	16,205	17,343	
86	11,340	13,308	15,188	15,931	17,230	18,450	
87	11,987	14,081	16,079	16,873	18,257	19,558	
88	12,427	14,611	16,711	17,559	19,023	20,399	
89	12,867	15,143	17,344	18,246	19,790	21,238	
90	13,307	15,675	17,976	18,934	20,556	22,079	
91	13,748	16,205	18,609	19,620	21,322	22,918	
92 93	14,188 14,447	16,737 17,046	19,241 19,609	20,307 20,711	22,088 22,550	23,759 24,269	
93 94	14,447	17,046	19,609	21,116	23,010	24,269	
95	14,708	17,555	20,349	21,522	23,472	25,288	
96	15,227	17,973	20,717	21,927	23,932	25,796	
97+	15,486	18,282	21,087	22,333	24,394	26,306	
	,	, .		,	, .	, .	

United Teacher Associates Insurance Company Long Term Care Form 1LTCGP0001-PA (Certificate 1LTCGP0002-PA) Base Premiums for: \$250,000 Pool of Money, HHC Daily Max = 100% of NH 0-Day Elimination Period Single Insured Annual Premiums *

Issue			Daily l	May			
Age	\$75/Day	\$100/Day	\$125/Day	\$150/Day	\$175/Day	\$200/Day	
	<u></u>		-			·	
<38	340	385	409	427	456	480	* Joint applicants receive
38	359	407	434	456	484	512	15% discount.
39	376	429	457	482	513	544	
40 41	395 412	451 474	482 507	509 535	543 573	576 607	
42	431	496	534	562	601	638	Modal Factors
43	457	529	569	602	644	686	Monthly: 0.09
44	484	562	607	643	690	733	Quarterly: 0.2625
45	512	596	644	683	732	782	Semiannual: 0.525
46	537	629	682	722	777	830	
47	565	661	718	763	821	877	
48	582	683	744	792	852	911	
49	597	707	769	821	883	945	
50	613	729	794	849	916	980	
51	630	749	821	877	947	1,016	
52	647	771	846	905	978	1,050	
53	683	816	895	959	1,037	1,114	
54 55	719	861 905	947 995	1,014	1,097	1,179	
56	755 791	903	1,047	1,067 1,122	1,156 1,214	1,243 1,307	
57	827	994	1,047	1,176	1,275	1,307	
58	911	1,100	1,215	1,307	1,416	1,526	
59	995	1,206	1,335	1,437	1,558	1,682	
60	1,081	1,310	1,455	1,566	1,700	1,836	
61	1,167	1,416	1,572	1,697	1,842	1,991	
62	1,251	1,523	1,693	1,825	1,986	2,145	
63	1,362	1,655	1,839	1,984	2,156	2,329	
64	1,473	1,789	1,986	2,142	2,326	2,513	
65	1,583	1,922	2,134	2,298	2,496	2,697	
66	1,696	2,055	2,281	2,455	2,666	2,881	
67	1,806	2,189	2,427	2,615	2,838	3,065	
68	2,020	2,454	2,727	2,939	3,193	3,452	
69	2,235	2,721	3,028	3,265	3,549	3,839	
70 71	2,451	2,987	3,327	3,593	3,905	4,224	
72	2,664 2,881	3,254 3,522	3,629 3,928	3,919 4,245	4,262 4,618	4,611 4,997	
73	3,401	4,162	4,646	5,019	5,457	5,908	
74	3,922	4,802	5,360	5,792	6,298	6,816	
75	4,443	5,441	6,075	6,564	7,139	7,725	
76	4,964	6,081	6,791	7,338	7,978	8,633	
77	5,485	6,720	7,505	8,112	8,819	9,543	
78	6,084	7,466	8,343	9,023	9,809	10,614	
79	6,685	8,213	9,182	9,934	10,800	11,688	
80	7,284	8,961	10,020	10,845	11,790	12,758	
81	7,884	9,708	10,858	11,755	12,781	13,831	
82	8,483	10,455	11,697	12,664	13,772	14,903	
83	9,109	11,240	12,578	13,631	14,829	16,056	
84 85	9,733 10,357	12,024 12,811	13,461 14,344	14,595 15,561	15,885 16,943	17,207 18,360	
86	10,981	13,595	15,226	16,525	18,001	19,512	
87	11,605	14,380	16,109	17,492	19,059	20,664	
88	12,032	14,918	16,703	18,144	19,784	21,470	
89	12,461	15,455	17,296	18,798	20,508	22,275	
90	12,890	15,992	17,889	19,450	21,233	23,080	
91	13,319	16,528	18,481	20,104	21,959	23,887	
92	13,747	17,065	19,076	20,756	22,682	24,692	
93	14,010	17,389	19,420	21,132	23,100	25,158	
94	14,272	17,712	19,768	21,506	23,519	25,623	
95	14,536	18,037	20,113	21,882	23,935	26,089	
96	14,798	18,360	20,459	22,257	24,355	26,556	
97+	15,060	18,684	20,807	22,631	24,771	27,021	

United Teacher Associates Insurance Company Long Term Care Forms 1LTCGP0001/02-PA and 1LTCGP0008/09-PA Factors to Apply to Base Rates (HHC Daily Max = 100% of NH) to Get:

	WICD 1	WICD "	N. WIIG
Issue Age	HHC Daily Max = 75% of NH	HHC Daily $\underline{Max = 50\% \text{ of NH}}$	No HHC <u>Coverage</u>
Age	(Form 1LTCGP0001)	(Form 1LTCGP0001)	(Form 1LTCGP0008)
<38	0.94	0.88	0.70
38	0.94	0.88	0.70
39	0.94	0.87	0.70
40	0.94	0.87	0.70
41	0.94	0.87	0.69
42 43	0.94 0.93	0.87 0.87	0.69 0.69
44	0.93	0.87	0.69
45	0.93	0.87	0.69
46	0.93	0.87	0.69
47	0.93	0.86	0.68
48	0.93	0.86	0.68
49	0.93	0.86	0.68
50	0.93	0.86	0.68
51 52	0.93 0.93	0.86 0.86	0.68 0.68
53	0.93	0.86	0.68
54	0.93	0.86	0.68
55	0.93	0.86	0.69
56	0.93	0.86	0.69
57	0.93	0.86	0.69
58	0.93	0.86	0.69
59	0.93	0.86	0.70
60 61	0.93 0.93	0.87 0.87	0.70 0.70
62	0.93	0.87	0.70
63	0.94	0.87	0.71
64	0.94	0.87	0.72
65	0.94	0.88	0.73
66	0.94	0.88	0.74
67	0.94	0.88	0.74
68	0.94	0.88	0.75
69 70	0.94 0.94	0.89 0.89	0.75 0.75
71	0.94	0.89	0.76
72	0.95	0.89	0.76
73	0.95	0.89	0.77
74	0.95	0.89	0.77
75	0.95	0.90	0.78
76	0.95	0.90	0.78
77	0.95	0.90	0.79
78 79	0.95 0.95	0.90 0.90	0.79 0.79
80	0.95	0.90	0.79
81	0.95	0.91	0.80
82	0.95	0.91	0.80
83	0.95	0.91	0.80
84	0.95	0.91	0.81
85	0.95	0.91	0.81
86	0.95	0.91	0.81
87 88	0.96 0.96	0.91 0.91	0.81 0.82
89	0.96	0.91	0.82
90	0.96	0.92	0.82
91	0.96	0.92	0.83
92	0.96	0.92	0.83
93	0.96	0.92	0.83
94	0.96	0.92	0.84
95 96	0.96 0.96	0.92 0.92	0.84 0.84
96 97+	0.96	0.92	0.84
211	0.50	0.73	0.85

United Teacher Associates Insurance Company Long Term Care Forms 1LTCGP0001/02-PA and 1LTCGP0008/09-PA Factors to Apply to Base Rates to Add:

			Benefit Increase
Issue	Compound	Simple	(Guaranteed Purchase)
Age	<u>Inflation</u>	Inflation	Option
Age	miation	miation	Орион
<38	2.25	1.55	1.03
38	2.25	1.55	1.03
39	2.25	1.55	1.03
40	2.25	1.55	1.03
41	2.25	1.55	1.03
42	2.25	1.55	1.03
43	2.23	1.55	1.03
44	2.21	1.55	1.03
45	2.19	1.55	1.03
46	2.17	1.55	1.03
47	2.15	1.55	1.03
48	2.13	1.55	1.03
49	2.11	1.55	1.03
50	2.09	1.55	1.03
51	2.07	1.55	1.03
52	2.05	1.55	1.03
53	2.03	1.55	1.03
54	2.01	1.55	1.03
55	1.99	1.55	1.03
56	1.97	1.55	1.03
57	1.95	1.55	1.03
58	1.94	1.55	1.03
59	1.93	1.55	1.03
60	1.92	1.55	1.03
61	1.91	1.55	1.03
62	1.90	1.55	1.03
63	1.88	1.54	1.03
64	1.86	1.53	1.03
65	1.84	1.52	1.03
66	1.82	1.51	1.03
67	1.80	1.50	1.03
68	1.77	1.50	1.03
69	1.74	1.50	1.03
70	1.74	1.50	1.03
71	1.68	1.50	1.03
72	1.65	1.50	1.03
73	1.61	1.48	1.03
74	1.57	1.46	1.03
75	1.53	1.44	1.03
76	1.49	1.42	1.03
76 77	1.45	1.40	1.03
78	1.43	1.38	1.03
78 79	1.43	1.36	1.03
80	1.39	1.34	
81	1.37	1.32	1.03 1.03
82	1.35	1.30	1.03
83	1.33	1.29	1.03
84	1.31	1.28	1.03
85	1.29	1.27	1.03
86 87	1.27	1.26	1.03
87 88	1.25	1.25	1.03
	1.24	1.24	1.03
89	1.23	1.23	1.03
90	1.22	1.22	1.03
91	1.21	1.21	1.03
92	1.20	1.20	1.03
93	1.20	1.20	1.03
94	1.19	1.19	1.03
95	1.19	1.19	1.03
96	1.18	1.18	1.03
97+	1.18	1.18	1.03

United Teacher Associates Insurance Company Long Term Care Forms 1LTCGP0001/02-PA and 1LTCGP0008/09-PA Factors to Apply to Base 0-Day Elimination Period Rates to Get:

Issue		Elimination Period of	i:	
Age	<u>20-Day</u>	60-Day	90-Day	180-Day
<38	0.97	0.92	0.90	0.85
38	0.97	0.92	0.89	0.85
39	0.97	0.92	0.89	0.84
40	0.97	0.92	0.89	0.84
41	0.97	0.92	0.88	0.83
42	0.97	0.91	0.88	0.83
43	0.97	0.91	0.88	0.82
44	0.96	0.91	0.88	0.82
45	0.96	0.91	0.87	0.82
46	0.96	0.91	0.87	0.81
47	0.96	0.90	0.87	0.81
48	0.96	0.90	0.87	0.81
49	0.96	0.90	0.86	0.80
50	0.96	0.90	0.86	0.80
51 52	0.96 0.96	0.90 0.90	0.86 0.86	0.79 0.79
53	0.96	0.90	0.86	0.79
54	0.96	0.90	0.85	0.79
55	0.96	0.89	0.85	0.79
56	0.96	0.89	0.85	0.78
57	0.96	0.89	0.85	0.78
58	0.96	0.89	0.85	0.78
59	0.96	0.89	0.85	0.78
60	0.96	0.89	0.85	0.78
61	0.96	0.89	0.84	0.77
62	0.96	0.89	0.84	0.77
63	0.96	0.89	0.84	0.77
64	0.96	0.89	0.85	0.77
65	0.96	0.89	0.85	0.78
66	0.96	0.89	0.85	0.78
67	0.96	0.89	0.85	0.78
68	0.96	0.89	0.85	0.78
69	0.96	0.89	0.85	0.78
70	0.96	0.89	0.85	0.78
71	0.96	0.89	0.85	0.78
72	0.96	0.89	0.85	0.77
73 74	0.96	0.89	0.85	0.77 0.78
75	0.96 0.96	0.89 0.89	0.85 0.85	0.78
75 76	0.96	0.89	0.85	0.78
77	0.96	0.89	0.85	0.78
78	0.96	0.89	0.85	0.78
79	0.96	0.89	0.85	0.78
80	0.96	0.89	0.85	0.78
81	0.96	0.89	0.85	0.78
82	0.96	0.89	0.85	0.78
83	0.96	0.89	0.85	0.77
84	0.96	0.89	0.84	0.77
85	0.96	0.89	0.84	0.77
86	0.96	0.89	0.84	0.77
87	0.96	0.89	0.84	0.77
88	0.96	0.89	0.84	0.76
89	0.96	0.89	0.84	0.76
90	0.96	0.88	0.84	0.76
91	0.95	0.88	0.84	0.76
92	0.95	0.88	0.83	0.75
93	0.95	0.88	0.83	0.75
94	0.95	0.88	0.83	0.75
95 96	0.95 0.95	0.88 0.88	0.83	0.75
96 97+	0.95	0.88	0.83 0.83	0.75 0.75
71T	0.93	0.00	0.65	0.75

United Teacher Associates Insurance Company Long Term Care Forms 1LTCGP0001/02-PA and 1LTCGP0008/09-PA Factors to Apply to Base Rates to Add:

Issue	Shortened Benefit Period
Age	(Non-forfeiture)
20	
<38	1.15
38 39	1.15 1.15
40	1.15
41	1.15
42	1.15
43	1.15
44	1.15
45	1.15
46	1.15
47	1.15
48	1.15
49	1.15
50	1.15
51	1.15
52	1.15
53 54	1.15 1.15
55	1.15
56	1.15
57	1.15
58	1.15
59	1.15
60	1.14
61	1.14
62	1.14
63	1.14
64	1.14
65	1.13
66	1.13
67	1.13
68 69	1.13 1.13
70	1.13
71	1.12
72	1.12
73	1.11
74	1.11
75	1.10
76	1.10
77	1.09
78	1.08
79	1.08
80	1.07
81 82	1.07 1.06
83	1.06
84	1.06
85	1.05
86	1.05
87	1.05
88	1.05
89	1.05
90	1.05
91	1.05
92	1.05
93	1.05
94	1.05
95	1.05
96	1.05
97+	1.05

United Teacher Associates Insurance Company Long Term Care Forms 1LTCGP0001/02-PA and 1LTCGP0008/09-PA Factors to Apply to Base Rates to:

Issue <u>Age</u>	Add Guaranteed Issue for Actively- at-Work-Employees	Change to 3 of 6 ADL's	Remove 15% Spouse Disc.	Change to 20% Spouse Disc.	Add 10-Year Survivorship	Add WOP on Home Health	Reduce / Increase Renewal Comm. *
<40	1.05	0.90	0.89	1.04	1.01	1.01	0.94 / 1.06
40-44	1.05	0.90	0.89	1.04	1.01	1.01	0.94 / 1.06
45-49	1.05	0.90	0.89	1.04	1.01	1.01	0.94 / 1.06
50-54	1.05	0.90	0.89	1.04	1.01	1.01	0.94 / 1.06
55-59	1.05	0.90	0.90	1.04	1.01	1.01	0.94 / 1.06
60-64	1.05	0.91	0.90	1.04	1.01	1.01	0.94 / 1.06
65-69	1.05	0.92	0.92	1.03	1.01	1.01	0.94 / 1.06
70-74	1.05	0.92	0.93	1.03	1.01	1.01	0.94 / 1.06
75-79	1.05	0.92	0.94	1.02	1.01	1.02	0.94 / 1.06
80-84	1.05	0.93	0.96	1.01	1.01	1.03	0.94 / 1.06
85-89	1.05	0.95	0.98	1.01	1.01	1.03	0.94 / 1.06
90-94	1.05	0.95	0.98	1.01	1.01	1.03	0.94 / 1.06
95+	1.05	0.95	0.98	1.01	1.01	1.03	0.94 / 1.06

Issue Age	Reduce / Increase New Comm. *	Add Restoration
<40	0.99 / 1.01	1.01
40-44	0.99 / 1.01	1.01
45-49	0.99 / 1.01	1.01
50-54	0.99 / 1.01	1.01
55-59	0.99 / 1.01	1.01
60-64	0.99 / 1.01	1.01
65-69	0.99 / 1.01	1.01
70-74	0.99 / 1.01	1.01
75-79	0.99 / 1.01	1.01
80-84	0.99 / 1.01	1.01
85-89	0.99 / 1.01	1.01
90-94	0.99 / 1.01	1.01
95+	0.99 / 1.01	1.01

^{*} Factors shown are for each 5 percentage points reduction / increase in commissions. Reductions / increases of other magnitudes would have proportional factors.

Note: no change will be made to the writing agent which would result in first year commissions exceeding 50% or renuewal commissions exceeding 10%.

State: Pennsylvania Filing Company: United Teacher Associates Insurance Company

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name: Long Term Care

Project Name/Number: GALIC Forms Rate Increase Filing for 2015/

Supporting Document Schedules

Bypassed - Item:	Transmittal Letter (A&H)
Bypass Reason:	N/A
Attachment(s):	
Item Status:	
Status Date:	
Bypassed - Item:	Actuarial Certification (A&H)
Bypass Reason:	N/A
Attachment(s):	
Item Status:	
Status Date:	
Satisfied - Item:	Actuarial Memorandum and Explanatory Information (A&H)
Comments:	Actualial Methoralidum and Explanatory Information (Actr)
Attachment(s):	Actuarial Memo & Appendices - PA Grp.pdf GALIC 2015 Exhibits 1, 2, 3.pdf
Item Status:	
Status Date:	
Bypassed - Item:	Advertisements (A&H)
Bypass Reason:	N/A
Attachment(s):	
Item Status:	
Status Date:	
Bypassed - Item:	Authorization to File (A&H)
Bypass Reason:	N/A
Attachment(s):	
Item Status:	
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Product Name:	Long Term Care					
Project Name/Number:	GALIC Forms Ra	ate Increase Filing for 2015/				
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UNITED TEACHER ASSOCIATES INSURANCE COMPANY

P.O. Box 203098 Austin, Texas 78720-3098

Actuarial Memorandum Supporting Rate Revisions for Long Term Care Insurance Base Policy Forms and Riders Associated with

1LTCGP0001-PA, 1LTCGP0008-PA

1. SCOPE AND PURPOSE

The purpose of this memorandum is to provide actuarial information supporting a rate revision to the Base Policy Forms and Riders of the United Teacher Associates Insurance Company (the Company) long-term care (LTC) policy forms referenced above.

These policies were originally sold under the name Great American Life Insurance Company (GALIC). Virtually all of the GALIC policies have been novated into United Teacher Associates (UTA), and the remaining GALIC policies are 100% ceded to (UTA). All policies issued in Florida are 100% ceded to GALIC and therefore are excluded from this analysis.

Some riders may not be available in all states. The issue date range that these forms were sold in this state is shown in Appendix A.

These forms are all included in this filing for filing simplicity. It is not the Company's intent to pool their experience.

These forms are no longer being marketed in any state and the Company is no longer selling any new Long-Term Care Insurance.

The Company is requesting a 30% rate increase at this time even though a 380.2% rate increase is justified under loss ratio requirements.

It is anticipated that the Company will file for additional premium rate increases on these policy forms in the future.

This rate revision is necessary because the current best estimate projections of the nationwide lifetime loss ratios are in excess of expected.

Policies were issued in your state under loss ratio requirements. The lifetime loss ratio that these products were initially priced to has been exceeded. The rate increase being requested is lower than what would be required to meet any minimum lifetime loss ratio requirements.

This rate filing is not intended to be used for other purposes.

The body of this actuarial memorandum was written to apply to each state where these products were issued. Any reference to information that is specific to a particular state is included in Appendix A.

Please refer to Section 22 for a description of the information contained in each Appendix.

2. POLICYHOLDER OPTIONS TO MITIGATE IMPACT OF PREMIUM RATE INCREASE

Optional Policyholder offers to Reduce Benefits

The Company will give policyholders Benefit Reduction Offers to help mitigate the impact to policyholders of the premium rate increase on the base policy and riders. The Benefit Reduction Offers will allow the policyholder to:

- 1. Lower their lifetime maximum benefit,
- 2. Lower their daily benefit, or
- 3. Increase their elimination period.

Non-forfeiture Offers

In addition, the Company will give the policyholder the option to accept a shortened benefit period. Acceptance of the non-forfeiture benefit will provide the policyholder with a paid-up policy, with no future premiums required. Under this paid-up policy, the maximum benefit amount is equal to the greater of the sum of premiums paid or 30 times their daily benefit, and the daily benefit amount is equal to the policyholder's current daily benefit amount. This non-forfeiture benefit shall not exceed the policyholder's remaining unused Maximum Lifetime Benefit at the time of conversion. Upon acceptance of this offer, an endorsement reflecting the non-forfeiture benefit will be sent to the policyholder. This offer will be made to all policyholders.

If applicable, for policyholders with active Limited Pay policy provisions, the Company will additionally provide policyholders an opportunity to elect a reduced paid-up policy in accordance with state regulatory requirements.

3. DESCRIPTION OF BENEFITS

Appendix B contains a brief summary of the benefits contained in these base forms and associated riders. A complete description of the benefit provisions and conditions for eligibility is contained in the policy forms and riders on file with the state.

4. RENEWABILITY CLAUSE

Policy Forms are Guaranteed Renewable, Group Long-Term Care policies.

5. MARKETING METHOD

Policy Forms were marketed to groups and then offered to individual employees by direct marketing methods. These products are not currently being marketed.

6. APPLICABILITY

The revised rates contained in this memorandum will be applicable to all renewals of the policy form and riders described in Section 1 as well as all future periodic inflation protection offers. The current and revised premium rate schedules are attached. The rate revision will be applied as a consistent percentage to all premium classes. The modal premium factors will remain unchanged from the current factors.

7. PROPOSED EFFECTIVE DATE

This rate will be implemented as soon as possible after approval has been granted as allowed based on regulation.

8. UNDERWRITING

Most policies subject to this rate revision were subject to full medical underwriting in accordance with Company standards in place at the time of issue. Some certificates sold were guaranteed issue or subject to simplified underwriting. The underwriting standards used were taken into consideration when projecting future experience.

9. ACTUARIAL ASSUMPTIONS

The actuarial assumptions used to project the future premiums and claims are described in this section. Appendix D provides further details of the experience studies conducted that were used to develop the actuarial assumptions. These base assumptions are the same as the assumptions being used in the Company's internal cash flow testing.

A. Morbidity

The morbidity assumptions are based on a combination of the Company's historical claim experience on these forms from 2006 through 9/30/2014, the Milliman 2011 Long Term Care Guidelines (Guidelines) and judgment. The Guidelines reflect over \$10 billion of insured data and the experience and judgment of Milliman actuaries. The claim cost assumptions reflect the Company's current best estimate of future morbidity. In setting the morbidity assumptions, the policy design, underwriting and claim adjudication practices have been taken into consideration. The baseline assumptions do not include any adverse selection resulting from the rate increase, loads for moderately adverse experience, or future morbidity improvement.

B. Mortality

The mortality assumptions were developed from a mortality study conducted on the Company's experience and judgment. The best estimate future mortality assumption is approximately 87% of the 1994 Group Annuity Mortality (GAM) table plus mortality selection factors. The mortality selection factors start at 0.20 in duration 1 and grade up to 1.00 by duration 15. No future mortality improvement or loads for adverse experience are applied.

C. Voluntary Lapse

The voluntary lapse assumptions were developed from a policy persistency study conducted on the Company's experience on these forms and judgment. Lapse rates are combined with mortality rates to derive the total termination rate. In addition, benefit exhaustion rates were calculated and added, to reflect policy termination when a person exhausts his benefit period. We assumed all remaining policies would terminate at attained age 120. The lapse assumptions represent the best estimate expectations of future experience and do not include any provisions for adverse experience. Voluntary lapse rates vary by marital status and inflation versus non-inflation. The

tables below show the detailed voluntary lapse assumptions for the applicable projected policy durations.

Voluntary Lapse Rate								
	Forms: 1LTCGP0001-PA, 1LTCGP0008-PA							
Duration	Marrie	d	Single	ı				
	Non-Inflation	Inflation	Non-Inflation	Inflation				
5	1.89%	1.78%	2.70%	3.08%				
6	1.68%	1.03%	2.40%	1.78%				
7	1.68%	1.03%	2.40%	1.78%				
8	1.43%	0.55%	2.04%	0.96%				
9	1.43%	0.55%	2.04%	0.96%				
10+	1.43%	0.55%	2.04%	0.96%				

Appendix E contains a comparison of the actual total termination rates to both the original pricing assumptions and current assumptions.

D. Interest Rate

Consistent with original pricing a discount rate of 5.5% was used to calculate the lifetime loss ratio in the supporting exhibits. This annual discount rate was used for both accumulating historical experience and for discounting projected future experience to present values.

E. Expenses

The need for a rate increase is based on the lifetime loss ratio being in excess of expected. Expenses do not directly impact the lifetime loss ratio and therefore are not used as justification for the rate increase. As such, expenses are not being projected and are not included in this filing.

10. ISSUE AGE RANGE

These products were available for issue ages 18 to 84. Premiums are based on issue age.

11. AREA FACTORS

The Company did not use area factors within the state in the premium scale for these products.

12. CLAIM LIABILITY AND RESERVE

Claim reserves were calculated using appropriate actuarial methods for IBNR and using continuance curves validated for the Company's experience for open claims on a disabled life basis. The claim reserves were discounted to the incurred date for each claim and have been included in the historical incurred claims.

13. ACTIVE LIFE RESERVES

Incurred claims are calculated without the impact of the change in active life reserves.

14. DISTRIBUTION OF BUSINESS

The historical experience reflects the actual distribution of policies during the experience period. The projected future experience is based on a seriatim projection of the current inforce policies. See Appendix C for the distribution of the inforce policies by key demographic and benefit characteristics.

15. NUMBER OF POLICYHOLDERS

Please refer to Appendix A for the current number of policyholders as of June 30, 2015 in this state.

16. AVERAGE ANNUAL PREMIUM

The average annual premium for these products both prior to the impact of the requested rate increase, and after, is indicated in Appendix A.

17. EXPERIENCE - PAST AND FUTURE

Nationwide historical experience since inception by "incurred year," or "loss year," for these policy forms and riders as of June 30, 2015 is contained in Exhibit 2a and Exhibit 2b. Experience for loss years 2015 and prior are developed through June 30, 2015. Exhibit 2a contains nationwide experience and Exhibit 2b contains the experience for only those policies sold in this state. In these exhibits, please note that the paid claims have been discounted with interest from the claim payment date back to the incurred date of the claim.

The Nationwide historical and projected experience, both with and without the impact of the requested rate increase, is contained in Exhibit 3a. Exhibit 3b contains the historical and projected experience, both with and without the impact of the rate increase requested, for only those policies sold in this state.

In developing the projected future experience with the rate increase, an implementation date of July 1, 2016 was assumed. No shock lapse or claims anti-selection was incorporated, as they were deemed to be immaterial given the level of rate increase which is being requested.

18. LIFETIME LOSS RATIO

The development of the anticipated nationwide lifetime loss ratio, both without the requested rate increase and with the requested rate increase, is shown in Exhibit 3.

19. MAXIMUM ALLOWABLE RATE INCREASE

The maximum allowable rate increase is shown in Appendix A under loss ratio requirements. This approach calculates the rate increase required such that the loss ratio developed at the time of pricing is achieved, using the discount rate assumed at pricing.

The requested rate increase is less than the maximum allowable increase under this approach.

20. HISTORY OF RATE ADJUSTMENTS

Please refer to Appendix A for the history of rate adjustments on these products in this state.

21. RELATIONSHIP OF RENEWAL PREMIUM TO NEW BUSINESS PREMIUM

The Company is no longer selling any new Long-Term Care business. Therefore, the comparison of renewal premium rates after the rate increase to the Company's current new business premium rate schedule is not applicable.

22. SUMMARY OF APPENDICES

Appendix A contains information that is specific to the state in which this filing is made, such as the average annual premium, the number of policyholders inforce, etc. Similar information for nationwide is also contained in this Appendix.

Appendix B contains a summary of the benefits included under each policy form grouping.

Appendix C contains a summary of the demographic distributions of the inforce policies as of June 30, 2015.

Appendix D contains a detailed summary of the development of the projection assumptions.

Appendix E contains a comparison of the actual total termination rates to both the original pricing assumptions and current assumptions.

23. SUMMARY OF EXHIBITS

Exhibit 1 contains the breakdown of policy counts, annualized premium, and average premium for all inforce policies by state under each product grouping.

Exhibit 2a contains the historical nationwide experience for all policies issued under these products by calendar year and duration.

Exhibit 2b contains the historical experience for all policies issued in this state under these products by calendar year and duration.

Exhibit 3a contains historical and projected nationwide experience for all policies issued under these products. The exhibit also includes the projected lifetime loss ratios both with and without the impact of the requested rate increase.

Exhibit 3b contains historical and projected experience for all policies issued in this state under these products. The exhibit also includes the projected lifetime loss ratios both with and without the impact of the requested rate increase.

24. ACTUARIAL CERTIFICATION

To the best of my knowledge and judgment this rate filing is in compliance with the applicable laws and regulations of this State as they relate to premium rate developments and revisions. This memorandum complies with all applicable Actuarial Standards of Practice, including ASOP No. 8.

I have reviewed and taken into consideration the policy design and coverage provided, and the Company's original underwriting and claims adjudication processes.

The projected experience shown in this Memorandum is based on best estimate assumptions and does not include any provision for moderately adverse experience. The rate increase being filed is lower than what would be required to meet any minimum lifetime loss ratio requirements. In my opinion, the rates are not excessive or unfairly discriminatory.

Deborah A. Keeler, ASA, MAAA

Senior Associate Actuary

United Teacher Associates Insurance Company

11001 Lakeline Blvd, Suite 120

Austin, Texas 78717

March 8th, 2016

Appendix A

United Teacher Associates Insurance Company 1LTCGP0001-PA, 1LTCGP0008-PA

Pennsylvania

Requested Rate Increase = 30%

Issue Date Range (Section 1 in Actuarial Memorandum)

Pennsylvania	2/1/2001	to	6/1/2002
Nationwide	5/1/1999	to	6/1/2006

Average Annual Premium (Section 16 in Actuarial Memorandum)

The average annual premium for this form and associated riders, prior to the rate increase, is:

Pennsylvania 1,595 Nationwide 949

The average annual premium for this form and associated riders, including the impact of the requested rate increase, is:

Pennsylvania 2,074 Nationwide 1,234

Maximum Allowable Rate Increase (Section 19 in Actuarial Memorandum)

Rate increase required to achieve pricing loss ratio 66%	380%
Requested rate increase	30%

Rate Increase History (Section 20 in Actuarial Memorandum)

Rate change of 20% was approved in 2014

Lifetime Loss Ratio - Nationwide (Section 18 in Actuarial Memorandum) Discounted at 5.5%

The Lifetime Loss Ratio for all policies without the requested rate increase is:	134%
The Lifetime Loss Ratio for all policies with the requested rate increase is:	124%

Number of Premium-Paying Policyholders and Annualized Premium as of June 30, 2015 (Section 15 in Actuarial Memorandum)

	Policies	Premium
Pennsylvania	4	\$ 5,881
Nationwide	559	\$ 491,421

Appendix B

United Teacher Associates Insurance Company Description of Benefits

Appendix B contains a brief summary of the benefits contained in the base forms and associated riders. A complete description of the benefit provisions and conditions for eligibility is contained in the policy forms and riders on file with the state.

Policy Forms 1LTCGP0001-PA and 1LTCGP0008-PA

Two policies were sold: a nursing home only policy (form 1LTCGP0008-PA) and a comprehensive nursing home plus home care policy (form 1LTCGP0001-PA). Except for the services covered, the pricing assumptions used, policy features, and benefit options are identical.

The elimination period could be chosen as 0, 20, 60, 90 or 180 service days. The benefit period is administered on a pool of money basis, where the pool of money is calculated either as the nursing home daily maximum times 365 times 2, 3, 4, 5, 6, 8, or unlimited, OR (at the option of the group) the pool of money could be chosen as a flat \$50,000, \$75,000, \$100,000, \$150,000, \$250,000, or unlimited. If the former approach was chosen, the nursing home daily maximum was available in multiples of \$10 (minimum of \$50). If the latter approach was chosen, the nursing home daily maximum could be \$75, \$100, \$125, \$150, \$175, or \$200. In either case on form 1LTCGP0001-PA, home health care coverage could be added with a daily maximum of 50%, 75% or 100% of the nursing home daily maximum.

Benefits are payable when the insured becomes disabled in two out of six Activities of Daily Living (ADLs) for 90 days, or when he or she becomes cognitively impaired.

An insured who qualifies for benefits is eligible to receive all long term care services that are included in the Plan of Care and covered under the policy. For form 1LTCGP0008-PA, this could include nursing home care or assisted living facility care. A 14-day per year bed reservation benefit could be included in the Plan of Care under the base policy. For form 1LTCGP0001-PA, the Plan of Care could include any of the benefits covered by the nursing home only policy, and/or it could include home health care, adult day care, up to 21 days per year of respite care, or up to 5 times the daily maximum in caregiver training (one time only). Other alternate services could be included, if agreed to by all parties and if the home health option were added. If the Company's Personal Care Advisor were used, the Plan could also include coverage of supportive and medical equipment, to a lifetime maximum of 30 times the nursing home daily maximum.

All benefits are subject to the daily maximums, the total benefit allowance (i.e., the pool of money), and the elimination period (except that the latter does not apply to the respite benefit, the care coordination services, or the caregiver training benefit).

Premiums are waived after the policyholder has been receiving covered nursing home or ALF benefits for 90 days and as long as the person continues to receive covered nursing home or ALF benefits.

Several optional benefits were available for these policies. Most of these options were available at the group policyholder level.

• <u>Compound Inflation Protection</u>: Increases the daily maximum and the remaining lifetime maximum by 5%, compounded annually, on each policy anniversary.

Appendix B

United Teacher Associates Insurance Company

Description of Benefits

- <u>Simple Inflation Protection</u>: Increases the daily maximum and the remaining lifetime maximum by 5% of the original amounts, on each policy anniversary.
- <u>Guaranteed Purchase</u>: Gives the insured the option of increasing benefits at scheduled intervals, based on the CPI. The incremental benefits will be subject to an additional premium, based on the insured's attained age.
- <u>Non-forfeiture Benefit</u>: After 3 years inforce, the cumulative premiums paid will be available upon lapse to continue coverage for a revised lifetime maximum (i.e., a shortened benefit period). The revised lifetime maximum will be calculated as the cumulative premiums, subject to a minimum of 30 times the daily maximum.
- <u>Survivorship Benefit</u>: Waives the premium to a surviving spouse after the death of the other spouse, as long as both spouses have had coverage inforce for at least 10 years.
- <u>3 of 6 ADLs</u>: Changes the benefit eligibility requirement from being disabled in 2 of 6 ADLs to being disabled in 3 of 6 ADLs.
- <u>WOP on Home Health</u> (Form 1LTCGP0001-PA only): Expands the waiver of premium benefit to also apply once a person has been receiving covered home health care benefits for 90 days.
- Restoration Benefit: Adds a benefit which restores the lifetime maximum to its original level, after the insured has recovered and returned to normal activities for 180 days.
- <u>Calendar Period Definition on Elimination Period</u>: Changes the definition of elimination period to be based on calendar days elapsed, rather than the number of days on which services are received.
- <u>Death Benefit</u>: Returns a specified percentage of the cumulative premiums paid to the insured's estate if death occurs before age 75. The percentage of premiums returned is 100% for deaths occurring through age 65; the percentage then grades down by 10% per year, to 0% for ages 75+.

Appendix C

United Teacher Associates Insurance Company Demographics

Distribution of Inforce Business as of June 30th, 2015 All Non-NFO Policies - NATIONWIDE

		Forms 1LTCGP0001 and 1LTCGP0008			
Issue Year	Count	% of Count	Premium	% of Premium	
1999	3	1%	3,572	1%	
2000	138	25%	86,711	18%	
2001	178	32%	154,458	31%	
2002	117	21%	133,382	27%	
2003	88	16%	84,290	17%	
2004	18	3%	17,765	4%	
2005	12	2%	8,516	2%	
2006	5	1%	2,726	1%	
2007	-	0%	-	0%	
2008	-	0%	-	0%	
2009	-	0%	-	0%	
2010	-	0%	-	0%	
Total	559	100%	491,421	100%	

	Forms 1LTCGP0001 and 1LTCGP0008			
Issue Age	Count	% of Count	Premium	% of Premium
<45	148	26%	58,988	12%
45 - 49	57	10%	44,978	9%
50 - 54	141	25%	118,385	24%
55 - 59	134	24%	142,086	29%
60 - 64	54	10%	81,409	17%
65 - 69	20	4%	29,785	6%
70 - 74	4	1%	9,897	2%
75 - 79	1	0%	5,893	1%
80+	-	0%	-	0%
Total	559	100%	491,421	100%

	Forms 1LTCGP0001 and 1LTCGP0008			
Attained Age	Count	% of Count	Premium	% of Premium
<45	31	6%	7,457	2%
45 - 49	32	6%	11,352	2%
50 - 54	44	8%	16,086	3%
55 - 59	57	10%	34,843	7%
60 - 64	92	16%	76,354	16%
65 - 69	155	28%	140,835	29%
70 - 74	111	20%	143,064	29%
75 - 79	22	4%	33,911	7%
80+	15	3%	27,517	6%
Total	559	100%	491,421	100%

	Forms 1LTCGP0001 and 1LTCGP0008					
Gender	Count	Count % of Count Premium % of Premiur				
F	348	62%	298,346	61%		
M	211	38%	193,075	39%		
Total	559	100%	491.421	100%		

	Forms 1LTCGP0001 and 1LTCGP0008			
Inflation Options	Count	% of Count	Premium	% of Premium
NONE	129	23%	79,789	16%
GPO/COLI	24	4%	21,458	4%
5% Simple Lifetime	10	2%	14,795	3%
5% Compound - Double (14 years)	-	0%	=	0%
5% Compound - Triple (23 years)	-	0%	=	0%
5% Compound - Lifetime	396	71%	375,379	76%
Total	559	100%	491,421	100%

Appendix C

United Teacher Associates Insurance Company Demographics

Distribution of Inforce Business as of June 30th, 2015 All Non-NFO Policies - NATIONWIDE

	Forms 1LTCGP0001 and 1LTCGP0008			
Limited Payment Options	Count	% of Count	Premium	% of Premium
Single	=	0%	=	0%
5 Pay	-	0%	-	0%
10 Pay	-	0%	-	0%
15 Pay	-	0%	-	
20 Pay	-	0%	-	0%
PU at 65	-	0%	-	0%
Lifetime	559	100%	491,421	100%
Total	559	100%	491,421	100%

		Forms 1LTCGP00	001 and 1LTCGP	0008
Elimination Period Days	Count	% of Count	Premium	% of Premium
0	-	0%	-	0%
20	6	1%	11,102	2%
30	-	0%	-	0%
60	=	0%	=	0%
90	553	99%	480,319	98%
100	-	0%	-	0%
180	-	0%	-	0%
365	-	0%	-	0%
Total	559	100%	491,421	100%

Benefit Period		Forms 1LTCGP00	001 and 1LTCGP	0008
	Count	% of Count	Premium	% of Premium
1 - 1.5 years	=	0%	=	0%
2 - 2.5 years	1	0%	882	0%
3 - 3.5 years	91	16%	76,999	16%
4 - 4.5 years	6	1%	6,530	1%
5 years	308	55%	226,112	46%
6 years	-	0%	-	0%
7 years	-	0%	-	0%
8 years	-	0%	-	0%
Lifetime	153	27%	180,899	37%
Total	559	100%	491,421	100%

		Forms 1LTCGP00	001 and 1LTCGD	2000
			JOI AND ILICOP	
Marital Status	Count	% of Count	Premium	% of Premium
Married	342	61%	313,102	64%
Single	217	39%	178,319	36%
Total	559	100%	491,421	100%

HHC Percent	Forms 1LTCGP0001 and 1LTCGP0008			
	Count	% of Count	Premium	% of Premium
0%	-	0%	-	0%
50%	78	14%	46,778	10%
75%	68	12%	64,608	13%
80%	-	0%	-	0%
100%	413	74%	380,035	77%
125%	-	0%	-	0%
150%	-	0%	-	0%
Total	559	100%	491,421	100%

Appendix D United Teacher Associates Insurance Company Actuarial Assumption Development

Appendix D contains a description of the experience studies conducted on the Company's actual experience.

Mortality Study

A mortality study was conducted on the Company's actual experience on its entire block of long term care business. The study included experience through 2013, with a start year that varied by legal entity. Actual deaths were reported in the data provided by the Company. A terminated policy is considered a death if it was coded as "Death" in the administrative system. Otherwise, the terminated policy is considered a voluntary lapse (if it did not exhaust benefits). It is our understanding that the Company coded the termination as a death if during the termination process it was reported as a death or identified as a death using the Social Security Administration's Death Master File.

The future expected mortality assumptions were developed based on the historical actual experience and judgment. The expected mortality table is based on the 1994 Group Annuity Mortality (GAM) table with selection factors. For the mortality study, historical mortality improvement was reflected by moving the table from 1994 to the central point of the study, at 1% mortality improvement per year.

The mortality study included all Long-Term Care business related to the Company. The mortality assumptions were considered appropriate for all of the Company's business. Exhibit D-3 contains the comparison of actual experience to the current mortality assumptions. The Exhibit shows total lives, total terminations (both voluntary lapse and actual deaths), actual deaths, expected deaths and the resulting mortality rates. Experience is shown for all business by policy duration and attained age. Since the current mortality assumptions reasonably match the historical actual experience, the assumptions are reasonable to use to project the inforce into the future.

Voluntary Lapse Study

A voluntary lapse study was also conducted on the Company's actual experience on these forms through 2013, with a start year that varied by legal entity. Voluntary lapse rates were calculated based on two approaches. First, "actual lapses" were determined by subtracting actual deaths and actual benefit exhausts from total terminations. Second, "implied lapses" were determined by subtracting expected deaths, using the mortality assumptions discussed above, and actual exhausts from total terminations. To the extent that the actual deaths are understated (due to underreporting of deaths or incorrect coding of social security numbers), actual mortality will increase while actual lapses will decrease. The total termination rates will not change.

The future expected voluntary lapse assumptions were developed based on the historical actual experience and judgment. The expected lapse rates vary by inflation option, spousal discount and policy duration.

Exhibit D-4 contains the comparison of actual lapse experience to the current assumptions for group policy forms. The Exhibits show total lives, total terminations (both voluntary lapse and actual deaths) and actual deaths. The voluntary lapse rates are shown as described above, as either "actual lapses" or

"implied lapses." Since the current voluntary lapse assumptions reasonably match the historical actual experience, the assumptions are reasonable to use to project the inforce into the future.

Morbidity Study

A morbidity study was also conducted on the Company's actual experience on these forms through 9/30/2014, with a start year that varied by legal entity. Actual claims were measured against the Milliman 2011 *Long Term Care Guidelines* (*Guidelines*). Actual-to-expected fitting factors were developed based on the actual experience and judgment.

A claim is defined as an episode of care that is not separated by more than 180 calendar days. Actual claim incidence was determined by counting each claim. Actual incurred claims are based on paid claims and remaining claim reserves discounted (using an interest rate of 4.5% for this experience study) back to the claim incurred date. The claim reserves were discounted from valuation date to the claim incurred date using a 4.5% discount rate and excluding any waiver of premium load, LAE load and explicit margin. The IBNR was allocated across 2014 expected claims. Actual incurred claims are calculated by adding together the present value of paid claims and claim reserves. Actual average claim severity was calculated by dividing actual incurred claims by the count of claims. In this study, waiver of premium was excluded from both the actual claims and expected claims.

Expected claims were based on the Guidelines and include underwriting selection factors, utilization factors, adjustment for specific benefits and actual-to-expected fitting factors. The actual-to-expected fitting factors varied by policy form, home health care percentage, benefit period, and marital status and were, in total, less than 100% for each form. No future morbidity improvement is assumed.

Exhibit D-5 contains the comparison of actual claim experience to the current assumptions.

Appendix D United Teacher Associates Insurance Company Mortality Study Exhibit D-3 Experience by Policy Duration

Policy	Total	Total	Actual	Expected	Actual	Expected	Actual to
Duration	Lives	Terminations	Deaths	Deaths	Mortality Rate	Mortality Rate	Expected
1 to 3	133,486	9,927	337	291	0.25%	0.22%	116%
4 to 6	151,469	6,020	973	806	0.64%	0.53%	121%
7 to 9	118,429	3,895	1,720	1,419	1.45%	1.20%	121%
10 to 12	77,262	3,100	1,715	1,718	2.22%	2.22%	100%
13+	63,798	3,725	2,445	2,766	3.83%	4.33%	88%
Total	544,445	26,667	7,190	7,000	1.32%	1.29%	103%

Notes:

- 1) Experience Periods: CGI & Loyal = 2002 through 2013, GALIC = 2006 through 2013, UTA = 2005 through 2013
- 2) Actual Deaths based on data received from the Company

A terminated policy is considered a death if it was coded as "Death" in the administrative system

- 3) Expected Mortality Rate is 88% of the 1994 Group Annuity Mortality (GAM) plus mortality selection factors
- 4) Mortality Study includes all premium payment options
- 5) Total Terminations include Actual Deaths, Actual Lapses, and Actual Benefit Exhausts
- 6) Mortality study was based on total long term care experience of all United Teacher Associates Insurance Company subsidiaries

Appendix D United Teacher Associates Insurance Company Voluntary Lapse Study Group Policy Forms Exhibit D-4

Experience by Policy Duration

Policy	Total	Total Terr	ninations	Morta	lity Rate	Volun	tary Lapse Rate	е
Duration	Lives	Count	Rate	Actual	Expected	Actual	Implied	"Current"
1	4,378	278	6.3%	0.2%	0.2%	6.2%	6.2%	2.2%
2	5,836	189	3.2%	0.1%	0.3%	3.1%	3.0%	2.3%
3	8,246	222	2.7%	0.5%	0.4%	2.2%	2.3%	2.3%
4	10,951	269	2.5%	0.6%	0.5%	1.8%	1.9%	2.3%
5	11,198	309	2.8%	1.2%	0.7%	1.5%	2.0%	2.3%
6	11,689	274	2.3%	0.9%	0.9%	1.4%	1.4%	1.7%
7	11,933	329	2.8%	1.5%	1.2%	1.2%	1.6%	1.7%
8	11,895	339	2.8%	1.6%	1.4%	1.1%	1.4%	1.2%
9	10,939	293	2.7%	1.7%	1.8%	0.9%	0.8%	1.2%
10+	27,526	1,036	3.8%	2.6%	2.9%	1.0%	0.7%	1.1%
Total	114,591	3,538	3.1%	1.4%	1.4%	1.6%	1.6%	

Notes:

- 1) GALIC = 2006 through 2013, UTA = 2005 through 2013
- 2) Actual Mortality Rate based on data received from the Company. A terminated policy is considered a death if it was coded as "Death" in the administrative system
- 3) Expected Mortality Rate is 88% of the 1994 Group Annuity Mortality (GAM) plus mortality selection factors
- 4) Actual Voluntary Lapse Rate is the Total Termination Rate minus the Actual Mortality Rate minus the Actual Benefit Exhaust Rate

 Benefit Exhausts are included in the Total Terminations listed above but excluded from the Actual Voluntary Lapse Rates
- 5) Implied Voluntary Lapse Rate is the Total Termination Rate minus the Expected Mortality Rate
- 6) Current Voluntary Lapse Rate is the current projection assumption.
 - Since these vary by inflation benefit option and spousal discount, the rates shown above are composites.
 - The ultimate lapse rate starts in duration 8 and later for 1LTCGP0001, 1LTCGP0008 and 10 and later for all other forms.
- 7) Includes only lifetime pay policies (excludes single pay, 5 pay, 10 pay, 15 pay, 20 pay, and paid-up at 65)

Appendix D United Teacher Associates Insurance Company Claim Study Exhibit D-5

Experience by Policy Duration

Policy	Total			Actual Claims			Exp	ected Claims		Actu	al to Expec	ted
Duration	Lives	Count	Paid	Reserve	Severity	Incurred	Count	Severity	Incurred	Incidence	Severity	Incurred
1 to 3	66,184	66	3,755,919	379,301	201,645	4,135,220	76	163,637	4,232,968	86%	123%	98%
4 to 6	67,108	138	6,383,675	3,850,797	209,130	10,234,472	190	182,485	11,582,018	73%	115%	88%
7 to 9	42,288	187	7,157,902	6,123,410	212,729	13,281,312	216	195,550	14,034,654	87%	109%	95%
10 to 12	15,175	144	5,158,531	4,378,019	200,361	9,536,550	133	206,687	9,172,315	108%	97%	104%
13+	3,541	46	690,730	2,146,100	282,679	2,836,830	48	304,489	3,419,573	97%	93%	83%
Total	194,296	581	23,146,757	16,877,628	68,845	40,024,385	663	64,007	42,441,528	88%	108%	94%

Experience by Policy Form

Policy	Total			Actual Claims			Exp	ected Claims		Actu	al to Expec	ted
Form	Lives	Count	Paid	Reserve	Severity	Incurred	Count	Severity	Incurred	Incidence	Severity	Incurred
1LTCGP0001, 1LTCGP0008	5,517	5	113,739	153,152	48,723	266,891	14	75,044	1,058,139	39%	65%	25%
1LTCIP0001, 1LTCIP0002	37,463	296	12,350,030	6,892,199	64,959	19,242,229	288	64,606	18,616,492	103%	101%	103%
2LTCIP0001	72,085	166	5,994,213	6,084,953	72,941	12,079,166	190	66,059	12,537,080	87%	110%	96%
rance Company subsidiaries	79,231	114	4,688,775	3,747,324	73,957	8,436,099	171	59,810	10,229,817	67%	124%	82%
Total	194,296	581	23,146,757	16,877,628	68,845	40,024,385	663	64,007	42,441,528	88%	108%	94%

Notes:

- 1) Experience from 2006 through 9/30/2014
- 2) Paid claims represent the present value of paid claims discounted to the claim incurred date
- 3) Reserve amounts represent the present value of the remaining claim reserve (including IBNR) discounted to the claim incurred date
- 4) Severity is defined as incurred claims divided by the count of claims
- 5) Expected Claims are based on the Milliman 2011 Long-Term Care Guidelines (including Product Factors)
- 6) Claim dollar amounts are discounted using a 4.50% interest rate (both actual and expected)
- 7) This exhibit excludes waiver of premium benefits in both actual and expected results

Appendix E
United Teacher Associates Insurance Company
Policy Persistency Comparison
1LTCGP0001, 1LTCGP0008

		Actual Results	Original	Pricing Assum	ptions	Cur	rent Assumptio	ons
Policy	Total	Total			Total			Total
Duration	Lives	Terminations	Lapse	Mortality	Terminations	Lapse	Mortality	Terminations
1	10	10.0%	8.4%	0.1%	8.5%	3.0%	0.0%	3.0%
2	26	7.7%	6.8%	0.2%	7.0%	2.7%	0.1%	2.8%
3	51	7.8%	4.7%	0.4%	5.1%	2.6%	0.1%	2.7%
4	161	7.5%	3.4%	0.6%	4.0%	2.3%	0.1%	2.4%
5	290	3.1%	3.5%	0.8%	4.3%	2.3%	0.2%	2.4%
6	489	2.2%	3.5%	1.0%	4.4%	1.5%	0.2%	1.7%
7	651	1.1%	3.4%	1.0%	4.4%	1.5%	0.3%	1.8%
8	642	2.6%	3.4%	1.2%	4.5%	1.0%	0.3%	1.3%
9	613	1.1%	3.4%	1.3%	4.7%	1.0%	0.4%	1.4%
10	588	2.7%	3.4%	1.5%	4.8%	1.0%	0.5%	1.5%
11	481	2.1%	3.4%	1.8%	5.2%	1.0%	0.6%	1.6%
12	338	1.5%	3.3%	1.7%	4.9%	1.0%	0.7%	1.6%
13	149	2.7%	3.2%	1.4%	4.6%	0.9%	0.6%	1.5%
14	3	0.0%	3.7%	3.7%	7.3%	0.6%	2.1%	2.7%

Notes:

- 1) The results shown above include only lifetime pay policies (excludes single pay, 5 pay, 10 pay, 15 pay, 20 pay, and paid-up at 65)
- 2) The "Actual Results" are the historical total policy termination rates observed by the Company for this form.
- 3) The "Original Pricing Assumptions" are those assumptions originally used to price this form.
- 4) The "Current Assumptions" are those used in the projection for the current rate filing. The mortality assumptions are 88% of the 1994 Group Annuity Mortality (GAM) plus mortality selection factors.
- 5) Experience is 2006 through 2013

Exhibit 1

United Teacher Associates Insurance Company Summary of Non-Paid Up Lives Nationwide

Policy Forms: 1LTCGP0001, 1LTCGP0008 As of 06/30/2015

Issue State	Lives		Annualized Premium		Average remium
AK	-	\$	-	\$	-
AL	8	\$	14,227	\$	1,778
AR	1	\$	882	\$	882
AZ	15	\$	25,804	\$	1,720
CA	2	\$	2,600	\$	1,300
СО	-	\$	-	\$	´-
СТ	-	\$	_	\$	_
DC	-	\$	_	\$	_
DE	_	\$	_	\$	-
GA	_	\$ \$	_	\$	-
HI	_	\$	_	\$	_
IA	17	\$	19,420	\$	1,142
ID	1	¢	1,304	\$	1,304
IL	17	\$ \$	19,494	\$	1,147
IN	5	\$	5,004	\$	1,001
KS	3	\$	3,004	\$ \$	1,001
	- 2F	\$ \$	- 17 475	\$ \$	-
KY	25	خ	17,475	Ş	699
LA	16	\$	21,003	\$	1,313
MA	-	\$	-	\$	1 022
MD	2	\$	3,847	\$	1,923
ME	16	\$	25,238	\$	1,577
MI	3	\$	3,378	\$	1,126
MN	22	\$	18,885	\$	858
МО	1	\$	1,320	\$	1,320
MS	-	\$	-	\$	-
MT	-	\$ \$ \$ \$ \$	-	\$	-
NC	6	\$	6,250	\$	1,042
ND	-	\$	-	\$	-
NE	3	\$	3,962	\$	1,321
NH	-	\$	-	\$	-
NJ	2	\$	1,515	\$	758
NM	-	\$	-	\$	-
NV	9	\$	7,316	\$	813
ОН	85	\$ \$	71,928	\$	846
OK	2	\$	2,662	\$	1,331
OR	40	\$ \$	49,803	\$	1,245
PA	4		5,881	\$	1,470
RI	-	\$	-	\$	-
SC	74	\$	35,006	\$	473
SD	-	\$	-	\$	-
TN	36	\$	42,026	\$	1,167
TX	3	\$	1,257	\$	419
UT	1	\$	663	\$	663
VA	13	\$	10,922	\$	840
VT	-	\$	-	\$	-
WA	-	\$	-	\$	-
WI	130	\$	72,348	\$	557
WV	-	\$	-	\$	-
WY	-	\$ \$ \$ \$ \$ \$ \$ \$ \$	-	\$	-
Total	559	\$	491,421	\$	879
		•	•		

Exhibit 2a

United Teacher Associates Insurance Company Policy Forms: 1LTCGP0001, 1LTCGP0008 Nationwide

Historical Experience by Loss Year As of 6/30/2015

Year	Premium	Incurred Claims	Loss Ratio
1999	3,771	-	0.0%
2000	30,357	-	0.0%
2001	340,927	-	0.0%
2002	546,315	195,783	35.8%
2003	654,346	24,580	3.8%
2004	571,675	8,569	1.5%
2005	556,375	306,201	55.0%
2006	529,790	0	0.0%
2007	528,670	-	0.0%
2008	515,515	55,021	10.7%
2009	519,704	22,104	4.3%
2010	495,098	(0)	0.0%
2011	482,235	(0)	0.0%
2012	477,969	138,221	28.9%
2013	472,786	62,983	13.3%
2014	469,877	80,379	17.1%
2015	241,280	16,810	7.0%
Total	7,436,690	910,650	12.2%

Historical Experience by Duration As of 6/30/2015

Year	Premium	Incurred Claims	Loss Ratio
1	792,311	31,262	3.9%
2	725,475	51,083	7.0%
3	649,432	300	0.0%
4	577,696	309,059	53.5%
5	540,148	6,050	1.1%
6	524,001	137,379	26.2%
7	501,101	53,591	10.7%
8	502,895	23,595	4.7%
9	506,805	4,594	0.9%
10	486,673	769	0.2%
11	471,405	163,812	34.7%
12	450,183	96,662	21.5%
13	371,014	14,414	3.9%
14	243,429	12,115	5.0%
15	88,047	5,635	6.4%
16	5,451	286	5.3%
17	624	43	7.0%
Total	7,436,690	910,650	12.2%

Present Values at 5.50%

Nationwide	Premium	Incurred Claims	Loss Ratio
Historical	11 326 322	1 422 664	12 6%

Exhibit 2b

United Teacher Associates Insurance Company Policy Forms: 1LTCGP0001, 1LTCGP0008 Pennsylvania

Historical Experience by Loss Year As of 6/30/2015

Year	Premium	Incurred Claims	Loss Ratio
1999	-	-	0.0%
2000	-	-	0.0%
2001	3,098	-	0.0%
2002	6,313	161	2.6%
2003	6,827	-	0.0%
2004	5,302	-	0.0%
2005	5,352	-	0.0%
2006	5,357	-	0.0%
2007	5,352	-	0.0%
2008	5,360	-	0.0%
2009	5,357	-	0.0%
2010	5,357	-	0.0%
2011	4,640	-	0.0%
2012	6,023	-	0.0%
2013	5,313	38	0.7%
2014	5,314	152	2.9%
2015	2,927	204	7.0%
Total	77,892	555	0.7%

Historical Experience by Duration As of 6/30/2015

Year	Premium	Incurred Claims	Loss Ratio
1	7,440	161	2.2%
2	6,816	-	0.0%
3	5,912	-	0.0%
4	5,348	-	0.0%
5	5,369	-	0.0%
6	5,358	-	0.0%
7	5,350	-	0.0%
8	5,357	-	0.0%
9	5,448	-	0.0%
10	4,730	-	0.0%
11	5,831	5	0.1%
12	5,313	39	0.7%
13	5,458	147	2.7%
14	3,115	130	4.2%
15	1,047	73	7.0%
16	-	-	0.0%
17	-	-	0.0%
Total	77,892	555	0.7%

Present Values at 5.50%

Pennsylvania	Premium	Incurred Claims	Loss Ratio
Historical	117,273	733	0.6%

Exhibit 3a

Great American Life Insurance Company Assumed by United Teacher Associates Insurance Company Policy Form: 1LTCGP0001, 1LTCGP0008 Nationwide

Historical and Projected Future Experience

Historical	25 01	F NG	/20	/2015

	Earned	Incurred	
Calendar Year	Premium	Claims	Loss Ratio
1999	3,771	=	0%
2000	30,357	-	0%
2001	340,927	-	0%
2002	546,315	195,783	36%
2003	654,346	24,580	4%
2004	571,675	8,569	1%
2005	556,375	306,201	55%
2006	529,790	0	0%
2007	528,670	-	0%
2008	515,515	55,021	11%
2009	519,704	22,104	4%
2010	495,098	(0)	0%
2011	482,235	(0)	0%
2012	477,969	138,221	29%
2013	472,786	62,983	13%
2014	469,877	80,379	17%
2015	241,280	16,810	7%

Projection	without	Rate	Increase

Projection	with	Rate	Increase

Calendar	•			Calendar			
Year	Earned Premium	Incurred Claims	Loss Ratio	Year	Earned Premium	Incurred Claims	Loss Ratio
2015	249,225	123,305	49%	2015	249,225	123,305	49%
2016	513,181	272,409	53%	2016	532,743	272,717	51%
2017	501,647	311,501	62%	2017	633,637	313,810	50%
2018	486,769	357,735	73%	2018	632,799	360,580	57%
2019	471,478	410,601	87%	2019	612,922	413,667	67%
2020	455,823	470,608	103%	2020	592,570	473,900	80%
2021	439,814	538,953	123%	2021	571,758	542,484	95%
2022	423,464	616,235	146%	2022	550,503	620,008	113%
2023	406,797	703,908	173%	2023	528,836	707,937	134%
2024	389,822	801,514	206%	2024	506,769	805,801	159%
2025	372,557	909,978	244%	2025	484,324	914,526	189%
2026	355,038	1,029,403	290%	2026	461,549	1,034,212	224%
2027	337,306	1,159,724	344%	2027	438,498	1,164,789	266%
2028	319,412	1,298,858	407%	2028	415,236	1,304,162	314%
2029	301,408	1,441,249	478%	2029	391,830	1,446,746	369%
2030	283,347	1,584,704	559%	2030	368,352	1,590,347	432%
2031	265,294	1,723,822	650%	2031	344,882	1,729,548	501%
2032	247,323	1,858,066	751%	2032	321,520	1,863,822	580%
2033	229,533	1,985,657	865%	2033	298,393	1,991,385	667%
2034	212,029	2,099,529	990%	2034	275,638	2,105,163	764%
2035	194,918	2,199,152	1128%	2035	253,393	2,204,640	870%
2036	178,295	2,274,534	1276%	2036	231,784	2,279,805	984%
2037	162,249	2,330,331	1436%	2037	210,924	2,335,337	1107%
2038	146,868	2,364,754	1610%	2038	190,928	2,369,457	1241%
2039	132,249	2,378,803	1799%	2039	171,923	2,383,175	1386%
2040	118,479	2,378,851	2008%	2040	154,022	2,382,886	1547%
2041	105,611	2,358,041	2233%	2041	137,294	2,361,725	1720%
2042	93,675	2,322,146	2479%	2042	121,777	2,325,472	1910%
2043	82,689	2,276,445	2753%	2043	107,496	2,279,422	2120%
2044	72,666	2,221,756	3057%	2044	94,466	2,224,403	2355%
2045	63,598	2,164,687	3404%	2045	82,677	2,167,030	2621%
2046	55,452	2,101,417	3790%	2046	72,087	2,103,477	2918%
2047	48,175	2,030,363	4215%	2047	62,628	2,032,156	3245%
2048	41,719	1,962,311	4704%	2048	54,235	1,963,867	3621%
2049	36,029	1,904,755	5287%	2049	46,838	1,906,109	4070%
2050	31,043	1,842,824	5936%	2050	40,356	1,844,001	4569%
2051	26,690	1,780,015	6669%	2051	34,697	1,781,037	5133%
2052+	144,285	19,171,934	13288%	2052+	187,570	19,177,742	10224%

Loss Ratio	Summaries	at 6/30/2015

Accumulated Value of Historical	11,326,322	1,422,664	13%	11,326,322	1,422,664	13%
Present Value of Future	5,277,265	20,747,870	393%	6,642,660	20,807,149	313%
Total Values	16,603,587	22,170,534	134%	17,968,983	22,229,813	124%
(Discounted at 5.50%)						

Exhibit 3b

Great American Life Insurance Company Assumed by United Teacher Associates Insurance Company Policy Form: 1LTCGP0001, 1LTCGP0008 Pennsylvania

Historical and Projected Future Experience

Historical as of 06/30/2015

	Earned	Incurred	
Calendar Year	Premium	Claims	Loss Ratio
1999	=	-	0%
2000	-	-	0%
2001	3,098	-	0%
2002	6,313	161	3%
2003	6,827	-	0%
2004	5,302	-	0%
2005	5,352	-	0%
2006	5,357	-	0%
2007	5,352	-	0%
2008	5,360	-	0%
2009	5,357	-	0%
2010	5,357	-	0%
2011	4,640	-	0%
2012	6,023	-	0%
2013	5,313	38	1%
2014	5,314	152	3%
2015	2,927	204	7%

	Projection with	out Rate Increase		Projection with Rate Increase			
Calendar				Calendar			
Year	Earned Premium	Incurred Claims	Loss Ratio	Year	Earned Premium	Incurred Claims	Loss Ratio
2015	2,946	1,579	54%	2015	2,946	1,579	54%
2016	6,106	3,623	59%	2016	6,339	3,627	57%
2017	5,962	4,302	72%	2017	7,531	4,332	58%
2018	5,748	5,123	89%	2018	7,473	5,162	69%
2019	5,524	5,902	107%	2019	7,181	5,944	83%
2020	5,288	6,749	128%	2020	6,875	6,795	99%
2021	5,042	7,711	153%	2021	6,554	7,760	118%
2022	4,784	8,820	184%	2022	6,220	8,873	143%
2023	4,517	10,080	223%	2023	5,873	10,137	173%
2024	4,243	11,523	272%	2024	5,516	11,584	210%
2025	3,964	13,005	328%	2025	5,153	13,071	254%
2026	3,681	14,549	395%	2026	4,786	14,618	305%
2027	3,396	16,158	476%	2027	4,415	16,231	368%
2028	3,110	17,825	573%	2028	4,043	17,901	443%
2029	2,825	18,852	667%	2029	3,672	18,927	515%
2030	2,541	19,592	771%	2030	3,303	19,665	595%
2031	2,263	20,251	895%	2031	2,942	20,321	691%
2032	1,994	20,748	1041%	2032	2,592	20,815	803%
2033	1,735	21,112	1217%	2033	2,256	21,175	939%
2034	1,491	20,949	1405%	2034	1,939	21,007	1084%
2035	1,265	19,953	1578%	2035	1,644	20,004	1217%
2036	1,060	18,697	1764%	2036	1,377	18,741	1361%
2037	876	17,408	1986%	2037	1,139	17,446	1531%
2038	715	16,098	2253%	2038	929	16,131	1737%
2039	574	14,780	2575%	2039	746	14,807	1984%
2040	455	12,934	2842%	2040	592	12,956	2190%
2041	356	10,999	3086%	2041	463	11,016	2378%
2042	275	9,234	3355%	2042	358	9,248	2584%
2043	209	7,650	3664%	2043	271	7,661	2822%
2044	156	6,246	4008%	2044	203	6,254	3087%
2045	114	4,943	4325%	2045	149	4,949	3331%
2046	82	3,815	4632%	2046	107	3,819	3567%
2047	58	2,889	4971%	2047	76	2,892	3828%
2048	40	2,133	5316%	2048	52	2,135	4093%
2049	27	1,529	5640%	2049	35	1,530	4342%
2050	18	1,052	5864%	2050	23	1,053	4514%
2051	12	696	5996%	2051	15	697	4616%
2052+	17	1,037	6055%	2052+	22	1,038	4661%

Loss Ratio Summaries at 6/30/2015							
Accumulated Value of Historical	117,273	733	1%	117,273	733	1%	
Present Value of Future	54,933	173,462	316%	68,828	174,145	253%	
Total Values	172,207	174,195	101%	186,101	174,878	94%	
(Discounted at 5.50%)							

March 8th, 2016

Pennsylvania Insurance Department 1326 Strawberry Square Harrisburg, PA 17120

RE: United Teacher Associates Insurance Company

NAIC No: 63479

Rate Revision Filing on Group Insurance Policy Forms:

1LTCGP0001-PA, 1LTCGP0008-PA

Dear Sir or Madam:

Enclosed for your review and approval, please find copies of an Actuarial Memorandum and rate sheets in support of a proposed 30% rate increase on the above referenced Long Term Care insurance products.

The base rate increase applies to the base policy and all applicable benefit riders for which a premium is paid. The rate increase will be effective on the first premium due date subsequent to state insurance department approval and in accordance with state policyholder notification requirements, with the additional condition that no policyholder will receive a rate increase sooner than one year after receiving a prior rate increase, if applicable.

This filing applies to inforce policies issued in this state. The above referenced policy forms are Group Long Term Care insurance products, which are no longer being sold.

Enclosed are any necessary certifications, transmittals, and/or filing fees as may be required by your state. I hope that with this information your approval of this filing will be forthcoming. If you have any questions or need additional information, please feel free to contact me.

Sincerely,

Deborah A. Keeler, ASA, MAAA

Senior Associate Actuary

United Teacher Associates Insurance Company

11001 Lakeline Blvd, Suite 120

Austin, Texas 78717

Email: debby.keeler@continental-ins.com